Remdesivir

This sheet talks about exposure to remdesivir in pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

**What is remdesivir?**

Remdesivir is an investigational antiviral medication. Investigational (or experimental) drugs are ones that are being studied to see if they help improve symptoms of certain conditions. Remdesivir is being studied for the treatment of some viruses, including SARS-CoV-2 (which causes COVID-19). Remdesivir is given by injection in the vein (IV) and is sold under the brand name Veklury®.

Because remdesivir is still being studied, there is limited information about whether or not it is safe and/or effective. However, the U.S. Food and Drug Administration (FDA) gave emergency permission for remdesivir to be used to treat some patients with severe COVID-19 infection. For more information about COVID-19, please see the MotherToBaby fact sheet at [https://mothertobaby.org/fact-sheets/covid-19/](https://mothertobaby.org/fact-sheets/covid-19/).

**I take remdesivir. Can it make it harder for me to get pregnant?**

Studies have not been done to see if remdesivir could make it harder for a woman to get pregnant.

**I just found out I am pregnant. Should I stop taking remdesivir?**

Talk with your healthcare providers before making any changes to this medication. It is important to make sure your condition is well-treated during pregnancy. The benefits of taking remdesivir may outweigh any potential risks to a pregnancy.

**Does taking remdesivir increase the chance for miscarriage?**

Miscarriage can occur in any pregnancy. Studies have not been done to see if remdesivir increases the chance for miscarriage.

**Does taking remdesivir increase the chance of birth defects?**

In every pregnancy, a woman starts out with a 3-5% chance of having a baby with a birth defect. This is called her background risk. A study of 16 women with COVID-19 who were treated with remdesivir found no increase in adverse effects to the infant, including birth defects. The number of women in this study is small and so it is not certain that remdesivir cannot increase the risk of birth defects in humans.

**Could taking remdesivir cause other pregnancy complications?**

Studies have not been done to see if remdesivir increases the chance for other pregnancy complications. There are two case reports of pregnant women who were treated with remdesivir in the second trimester of pregnancy. Both women were still pregnant at the time of publication, but no negative side effects were reported.

**Does taking remdesivir in pregnancy cause long-term problems in behavior or learning for the baby?**

Studies have not been done to see if remdesivir causes long-term behavior or learning problems.

There is one reported case of a baby born to a woman who was diagnosed with the Ebola virus. The baby was also diagnosed with Ebola, and was treated with remdesivir. The baby had no reported serious reactions to remdesivir and was followed until one year of age. The child was reported to have weight and development that were appropriate for age.

**Can I breastfeed while taking remdesivir?**

Breastfeeding may not be recommended if a woman is taking remdesivir. Because remdesivir is an experimental medication, there are no studies looking at use during breastfeeding. It may also be because women being treated with remdesivir are very ill and may not feel well enough to breastfeed their baby. If a woman wants to breastfeed but is unable to do so, they can work with their healthcare provider or lactation consultant to help establish or keep up
their milk supply for breastfeeding after treatment with remdesivir is finished.

Remdesivir is poorly absorbed when given by the mouth (orally), so infants are not likely to absorb large amounts of the drug from breast milk. If remdesivir is used during breastfeeding, the baby may be monitored for issues with liver and kidney function (the way the baby’s liver and kidneys work), the baby’s blood pressure, and for diarrhea or rash. If you suspect the baby has any symptoms, contact the child’s healthcare provider. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

If a man takes remdesivir, could it affect his fertility (ability to get partner pregnant) or increase the chance of birth defects?

Studies have not been done to see if remdesivir affects a man’s fertility. In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.

Please click here for references.