Remdesivir (Veklury®)

This sheet is about exposure to remdesivir in pregnancy and while breastfeeding. This information is based on available research studies. It should not take the place of medical care and advice from your healthcare provider.

What is remdesivir?

Remdesivir is an antiviral medication that has been approved to treat SARS-CoV-2 virus, which causes COVID-19. It has also been used to treat Ebola virus infections. Remdesivir is sold under the brand name Veklury®.

Having a COVID-19 infection during pregnancy can increase the chance of having severe symptoms and pregnancy-related problems. For more information about COVID-19, please see the MotherToBaby fact sheet at https://mothertobaby.org/fact-sheets/covid-19/.

Sometimes when women find out they are pregnant, they think about changing how they take their medication, or stopping their medication altogether. However, it is important to talk with your healthcare providers before making any changes to how you take your medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy.

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

It is not known if remdesivir can make it harder to get pregnant.

Does taking remdesivir increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. It is not known if remdesivir can increase the chance of miscarriage. In studies with a total of 150 pregnancies, no increased chance of miscarriage was reported.

Does taking remdesivir increase the chance of birth defects?

Birth defects can happen in any pregnancy for different reasons. Out of all babies born each year, about 3 out of 100 (3%) will have a birth defect. We look at research studies to try to understand if an exposure, like remdesivir, can increase the chance of birth defects in a pregnancy. There are no human studies looking at the chance of birth defects with remdesivir use in pregnancy. Animal studies have not shown an increased chance of birth defects.

Does taking remdesivir in pregnancy increase the chance of other pregnancy-related problems?

Reports of 70 women who were treated with remdesivir for COVID-19 infections in the second and third trimesters of pregnancy found a higher chance for preterm delivery (birth before week 37), low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth), and cesarean section. However, these women were very sick with COVID-19. Also, preterm delivery has been associated with COVID-19 infection in pregnancy. It is not known if these outcomes were due to the COVID-19 illness, the medication, or other factors. Another small study did not find an increased chance of preterm delivery with the use of remdesivir.

Does taking remdesivir in pregnancy affect future behavior or learning for the child?

Studies have not been done to see if remdesivir can increase the chance of behavior or learning issues for the child.

Breastfeeding while taking remdesivir:

Remdesivir passes into breast milk in small amounts. Nursing infants are not likely to absorb large amounts of the medication from milk. Remdesivir is approved to be given to children older than 28 days to treat Ebola and COVID-19 infections. No side effects have been reported in the children prescribed remdesivir or in the reports of children exposed to remdesivir through breast milk. If you suspect the baby has symptoms (such as diarrhea, rash, decreased urination, or dizziness), contact the child's healthcare provider.

The virus that causes COVID-19 has not been found to pass through breast milk. There are no reported cases of infants getting COVID-19 through breast milk. The Centers for Disease Control and Prevention (CDC) encourages women to

continue to breastfeed or provide breast milk for their babies even if they have a viral infection like COVID-19. There are antibodies in breast milk that might help prevent a baby from getting sick with COVID-19.

Women with COVID-19 might feel too sick to breastfeed. The CDC recommends continuing to express milk when possible.

While sick, it is important to try to protect the baby from getting sick. Wash your hands with soap and water before holding your baby. Avoid coughing or sneezing on your baby. Cover your mouth/nose with a tissue when you cough or sneeze, then throw away the tissue and wash your hands. While you are ill, you might want to consider having someone who is not sick help you care for your baby. If you think your baby has symptoms of COVID-19, contact your child's healthcare provider. Be sure to talk to your healthcare provider about all your breastfeeding questions.

If a man takes remdesivir, could it affect fertility or increase the chance of birth defects?

Studies have not been done to see if remdesivir could affect a man's fertility (ability to get a woman pregnant) or increase the chance of birth defects. In general, exposures that men 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/

Please click here for references.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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