Diazepam (Valium®)

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

What is diazepam?

Diazepam is a medication that has been used to treat anxiety, sleeplessness, muscle spasms, and alcohol withdrawal. It is sometimes used with other medications to treat seizures. Diazepam is in the class of medication called benzodiazepines. It is sold under the brand name Valium®.

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. Some women can have a return of their symptoms (relapse) if they stop this medication during pregnancy.

If you plan to stop this medication, your healthcare provider may suggest that you slowly lower the dose instead of stopping all at once. Stopping this medication suddenly can cause some people to have withdrawal symptoms. It is not known what effects, if any, withdrawal could have on a pregnancy.

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

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

Does taking diazepam increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. It is not known if diazepam can increase the chance of miscarriage.

Does taking diazepam 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 diazepam, might increase the chance of birth defects in a pregnancy.

Diazepam is not expected to increase the chance of birth defects. Older studies suggested a less than 1 in 100 (less than 1%) increased chance of cleft lip and/or cleft palate if a woman uses diazepam in the first trimester of pregnancy. A cleft lip or cleft palate is when the lip and/or roof of the mouth is formed with a split and can need surgery to be corrected. More recent studies that are larger and better designed have not found an increased chance of oral clefts or other birth defects with diazepam use in pregnancy.

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

Some, but not all, studies reported that taking diazepam or other benzodiazepines in pregnancy might increase the chance for pregnancy complications such as preterm delivery (delivery before 37 weeks of pregnancy), low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth), and/or smaller head size. As there can be many causes of pregnancy-related complications, it is hard to know if a medication, the medical condition, or other factors are the cause of the reported complications.

I need to take diazepam during my pregnancy. Will it cause withdrawal symptoms in my baby after birth?

The use of diazepam during pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. Symptoms might include breathing problems, jitteriness, excessive crying, and trouble keeping their body temperature. Some newborns may have loose muscle tone, sluggishness, and trouble latching on to feed (called “floppy infant syndrome”). Some babies might need to spend more time in the hospital to help manage these symptoms. The symptoms are expected to go away within a few weeks. Not all babies exposed to

diazepam will have these symptoms. It is important that your healthcare providers know you are taking diazepam so that if symptoms occur, your baby can get the care that is best for them.

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

It is not known if diazepam can increase the chance for behavior or learning issues. Two studies have followed children who were exposed to diazepam during pregnancy until the children were up to 18 months or 3 years of age. These studies reported that the children were more likely to show certain behaviors, such as anxiety, sadness, and fearfulness. One study, on benzodiazepines in general, found that using a benzodiazepine medication, including diazepam, in pregnancy might make it slightly more likely for someone to have autism or Attention-Deficit/Hyperactivity Disorder (ADHD). However, when the study compared siblings who were exposed to a benzodiazepine with siblings who were not exposed, they no longer found an increased chance for ADHD or autism. This study suggests that the chance for ADHD or autism is more likely associated with genetic factors. In addition, another study on benzodiazepines, including diazepam, did not report a higher chance for ADHD and autism.

Breastfeeding while taking diazepam:

Diazepam passes into breast milk in small amounts. Diazepam can stay in the body longer than some other benzodiazepine medications. If you use diazepam regularly while breastfeeding, there is a chance it could build up in the baby's system. This might cause sleepiness or affect your child's weight gain. If you suspect the baby has any symptoms like trouble feeding, breathing, gaining weight, being too sleepy, or hyperbilirubinemia, contact the child's healthcare provider.

The product label for diazepam recommends women who are breastfeeding not use this medication. But the benefit of using diazepam may outweigh possible risks. Your healthcare providers can talk with you about using diazepam and what treatment is best for you. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

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

Studies have not been done to see if diazepam could affect male fertility (ability to make healthy sperm) 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.

Diazepam (Valium®)

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

What is temazepam?

Temazepam is a medication that has been used to treat insomnia (having a hard time falling asleep or staying asleep). Temazepam is in a class of medications called benzodiazepines. It is sold under the brand name Restoril®.

Sometimes when people 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.

If you plan to stop this medication, your healthcare provider might suggest that you slowly lower the dose instead of stopping all at once. Stopping this medication suddenly can cause some people to have withdrawal symptoms. It is not known what effects, if any, withdrawal could have on a pregnancy.

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

It is not known if using temazepam could make it harder to get pregnant.

Does taking temazepam increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. One study suggested that temazepam might increase the chance of miscarriage. As there can be many causes of miscarriage, it is hard to know if a medication, the medical condition being treated, or other factors are the cause of a miscarriage.

Does taking temazepam 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 temazepam, might increase the chance of birth defects in a pregnancy.

A study of 379 children exposed to temazepam in the first trimester of pregnancy did not find a higher chance of birth defects.

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

Studies have not been done to see if temazepam can increase the chance of pregnancy-related problems such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth).

I need to take temazepam throughout my entire pregnancy. Will it cause symptoms in my baby after birth?

The use of benzodiazepines during pregnancy near the time of delivery could cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. Symptoms can include irritability, crying, sleep disturbances, tremors, jitteriness, trouble breathing, or muscle weakness. Not all babies exposed to benzodiazepines will have these symptoms. It is not known if the use of temazepam in pregnancy can cause these symptoms in a newborn. It is important that your healthcare providers know you are taking temazepam so that if symptoms occur your baby can get the care that is best for them.

Can I take my benzodiazepine with diphenhydramine?

A single human report and animal data have suggested that the combination of temazepam and diphenhydramine (Benadryl®) might increase the chance for stillbirth or for infant death shortly after birth. People taking temazepam should talk with their healthcare provider before taking diphenhydramine during their pregnancy. MotherToBaby has a fact sheet on diphenhydramine here: https://mothertobaby.org/fact-sheets/diphenhydramine-pregnancy/.

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

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

Breastfeeding while taking temazepam:

Temazepam has not been well studied for use while breastfeeding. Only small amounts of temazepam get into breast milk. No side effects were reported in approximately 10 infants who were exposed to temazepam through breast milk. Children exposed to temazepam through breastfeeding should be watched for excessive drowsiness (being too sleepy). If you suspect the baby has any symptoms (such as being very sleepy, poor weight gain, low muscle tone [floppiness], or slowed breathing), contact the child's healthcare provider. Be sure to talk to your healthcare provider about all your breastfeeding questions.

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

Studies have not been done to see if temazepam could affect men's fertility (ability to get a partner pregnant) or increase the chance of birth defects. In general, exposures that fathers or sperm donors 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.

Diazepam (Valium®)

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

What is midazolam?

Midazolam is a medication that has been used to help patients relax, be calm, and sleep before medical procedures, dental work, or surgeries. It has also been used to treat seizures and anxiety. Two brand names for midazolam are Versed® and Seizalam®. Midazolam is in a class of medications called benzodiazepines. MotherToBaby has a general fact sheet on anxiety at https://mothertobaby.org/fact-sheets/anxiety-fact/.

Sometimes when people 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 midazolam. Can it make it harder for me to get pregnant?

Studies have not been done in humans to see if taking midazolam could make it harder to get pregnant. In an experimental animal study, midazolam did not affect fertility (ability to get pregnant).

Does taking midazolam increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies have not been done to see if midazolam could increase the chance of miscarriage.

Does taking midazolam 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 published data to try to understand if an exposure, like midazolam, might increase the chance of birth defects in a pregnancy. Studies have not been done in humans to see if midazolam can increase the chance of birth defects. Animal studies did not find a higher chance of birth defects with exposure to midazolam.

Does taking a benzodiazepine increase the chance of birth defects, such as cleft lip and palate?

Some of the first studies that looked at the use of other benzodiazepines in pregnancy suggested a slight increased chance of cleft lip and/or cleft palate (opening in the upper lip and/or the roof of the mouth) if taken during the first trimester. Since these early reports, there have been other studies and reviews that have not found an increased chance of birth defects with the use of benzodiazepines during the first trimester.

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

Studies have not been done to see if midazolam can increase the chance of other pregnancy-related problems such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at

birth).

If used near the end of a pregnancy, will midazolam cause symptoms in my baby after birth?

The use of midazolam as part of a C-section can cause temporary symptoms in newborns such as trouble breathing soon after birth. Not all babies exposed to midazolam will have this issue. There have been reports of use of midazolam during C-section without problems for the newborn. C-section itself can cause temporary breathing problem in the baby.

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

Studies have not been done to see if midazolam can increase the chance of behavior or learning issues for the child. Animal studies have reported that midazolam, in combination with other medications for general anesthesia, might affect the developing brain. Based on this, the US Food and Drug Administration (FDA) has suggested that midazolam be avoided for use as general anesthesia and sedation during the third trimester of pregnancy for surgeries not related to delivery of the baby. If needed for a C-section, the baby would be exposed only for a short period of time; this has not been associated with learning issues. For more general information on anesthesia, please see the MotherToBaby fact sheet at https://mothertobaby.org/fact-sheets/general-anesthesia-pregnancy/.

Breastfeeding while taking midazolam:

Midazolam has not been well studied for use while breastfeeding. Small amounts of midazolam can get into breast milk after single intravenous (IV) doses. If midazolam is given as part of general anesthesia (including for C-section), or as a single dose, breastfeeding can be restarted as soon as the mother is ready to nurse and once any side effects, such as feelings of sleepiness, have passed. Some professional organizations recommend delaying breastfeeding for at least 4 hours after midazolam is used during a procedure. If more than one IV dose is given during breastfeeding, watch the baby for sleepiness (hard to wake for feeding), low energy, or poor suckling. If you suspect the baby has any symptoms, contact the child's healthcare provider. Be sure to talk with your healthcare provider about all your breastfeeding questions.

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

Studies have not been done to see if midazolam could affect men's fertility (ability to get a partner pregnant) or increase the chance of birth defects. In general, exposures that fathers or sperm donors 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.

North American Antiepileptic Drug (AED) Pregnancy Registry: There is a pregnancy registry for women who take antiepileptic medications, such as midazolam. Please see the registry website for more information: https://www.aedpregnancyregistry.org/introduction/.

National Pregnancy Registry for Psychiatric Medications: There is a pregnancy registry for women who take psychiatric medications, such as midazolam. For more information you can look at their website: https://womensmentalhealth.org/research/pregnancyregistry/.

Diazepam (Valium®)

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

What is triazolam?

Triazolam is a medication that has been used to treat insomnia (having a hard time falling asleep or staying asleep), and to help lower anxiety about medical procedures. Triazolam is in a class of medications called benzodiazepines. A brand name for triazolam is Halcion®.

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 this medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of an untreated condition during pregnancy.

If you plan to stop this medication, your healthcare provider may suggest that you slowly lower the dose instead of stopping all at once. Stopping this medication suddenly can cause some people to have withdrawal symptoms. It is not known what effects, if any, withdrawal could have on a pregnancy.

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

Studies have not been done to see if taking triazolam could make it harder to get pregnant.

Does taking triazolam increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies have not been done to see if triazolam increases the chance of miscarriage.

Does taking triazolam increase the chance of having a baby with a birth defect?

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 triazolam, might increase the chance of birth defects in a pregnancy.

Triazolam has not been well studied for use in pregnancy, so it is not known if triazolam increases the chance for birth defects. Experimental animal studies did not find a higher chance for birth defects with exposure to triazolam. A report looking at women who filled at least 1 triazolam prescription found no link between triazolam and an increased chance for birth defects. Prescription based studies like this cannot tell us if the person who filled the prescription took the medication during their pregnancy.

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

Studies have not been done to see if triazolam increases the chance for pregnancy-related problems such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth).

I need to take triazolam throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?

The use of triazolam during pregnancy might cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal and may include poor muscle tone and trouble feeding. Not all babies exposed to triazolam will have these symptoms. It is important that your healthcare providers know you are taking triazolam so that if symptoms occur your baby can get the care that is best for them.

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

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

Breastfeeding while taking triazolam:

Triazolam has not been well studied for use while breastfeeding. There is 1 case of an infant who was exposed to triazolam through breastmilk without reported side effects. Children exposed to benzodiazepines through breastfeeding should be watched for excessive drowsiness (being very sleepy and hard to wake). If you suspect the baby has any symptoms such as not being able to wake them, poor weight gain, low muscle tone (floppiness), or slowed breathing, contact the child's healthcare provider Be sure to talk to your healthcare provider about all your breastfeeding questions.

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

Studies have not been done to see if triazolam could affect a man's fertility (ability to get a woman pregnant) or increase the chance of birth defects above the background risk. There is 1 case report of absence of sperm in a man taking triazolam and other medications; sperm counts returned to normal several months after stopping triazolam. A single case report cannot predict how this medication would affect sperm production in all men using the medication. 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.

Diazepam (Valium®)

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

What is lorazepam?

Lorazepam is a medication that has been used to treat anxiety and insomnia (trouble falling and/or staying asleep). It has also been used to treat seizures and alcohol withdrawal syndrome. Some brand names for lorazepam are Alzapam®, Ativan®, Loram®, Loraz®, and Loreev®. Lorazepam belongs to the class of medication called benzodiazepines.

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. Studies have shown that when anxiety is left untreated during pregnancy, there can be a higher chance for pregnancy complications such as preterm delivery and/or low birth weight. MotherToBaby has a fact sheet on anxiety at https://mothertobaby.org/fact-sheets/anxiety-fact/.

Some women have physical symptoms (called withdrawal) when they suddenly stop taking lorazepam. It is not known if or how withdrawal might affect a pregnancy. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy.

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

Studies have not been done to see if lorazepam can make it harder to get pregnant.

Does taking lorazepam increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. It is not known if lorazepam could increase the chance of miscarriage. Some studies looking at benzodiazepines as a group suggest an increased chance of miscarriage. Because miscarriage can happen for many reasons, it is hard to know if a medication, the medical condition being treated, other health factors or age are the cause.

Does taking lorazepam 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 lorazepam, might increase the chance of birth defects in a pregnancy.

It is unlikely that lorazepam significantly increases the chance of birth defects. One study found a possible association with anal atresia (bottom of the intestinal tract is closed off), and another study found an increased chance of pulmonary valve stenosis (abnormal development of the baby's heart). However, other studies did not find an increased chance of birth defects with the use of lorazepam.

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

Some studies have suggested a higher chance of preterm delivery (birth before week 37) and low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth) in infants that were exposed to lorazepam in the second half of pregnancy. However, not all studies found a higher chance for these pregnancy-related complications. It is possible that other factors, not lorazepam, caused these complications.

I need to take lorazepam during my pregnancy. Will it cause withdrawal symptoms in my baby after birth?

The use of lorazepam during pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. Symptoms can include irritability, crying, sleep disturbances, tremors, jitteriness, trouble breathing, or muscle weakness. Not all babies exposed to lorazepam will have these symptoms. If symptoms develop, they usually go away within a few weeks and are not known to have any long-term

effects for the baby. It is important that your healthcare providers know you are taking lorazepam so that if symptoms occur, your baby can get the care that is best for them.

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

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

Breastfeeding while taking lorazepam:

Lorazepam gets into breast milk in small amounts. No side effects were found in studies of children exposed through breast milk. If you suspect the baby has any symptoms (being too sleepy, slower breathing rate, poor feeding, or poor weight gain), contact the child's healthcare provider. Be sure to talk to your healthcare provider about all your breastfeeding questions.

If a man takes lorazepam, can it affect his fertility or increase the chance of birth defects?

When a male takes lorazepam, it is not expected to affect fertility (ability to make healthy sperm) 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 on Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/.

Please click here for references.