

# Sumatriptan

---

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

## ***What is sumatriptan?***

Sumatriptan is a medication used to treat migraine headaches. It can be used orally (pill), by nasal spray, or by injection (shot). Some brand names for sumatriptan are Imitrex®, Alsuma®, Imigran®, Onzetra Xsail®, Tosymra®, Zembrace SymTouch®. Sumatriptan is also available in a combination product (Treximet®) that also contains naproxen. Naproxen containing products are best to avoid during late pregnancy. For more information on naproxen, see our fact sheet at <https://mothertobaby.org/fact-sheets/naproxen/>.

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

## ***Are there any effects of having a migraine headache during pregnancy?***

During pregnancy, the amount and severity of migraines often decreases. However, 25% of people with migraines report that their symptoms remained the same or got worse during a pregnancy. Some studies have shown that people with a history of migraine headaches have a slightly higher chance for pregnancy complications including high blood pressure, preeclampsia and pregnancy-related stroke. Preeclampsia is a pregnancy related condition that can cause symptoms such as high blood pressure or fluid retention.

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

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

## ***Does taking sumatriptan increase the chance for miscarriage?***

Miscarriage can occur in any pregnancy. There have been several studies done that have not found an increased chance of miscarriage when sumatriptan was used during pregnancy.

## ***Does taking sumatriptan increase the chance of birth defects?***

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. Overall, the studies have not found an increased chance of birth defects when sumatriptan is used in the first trimester.

## ***Does taking sumatriptan in pregnancy increase the chance of other pregnancy related problems?***

It is not known if sumatriptan increases the chance for pregnancy complications because studies have had mixed results (some finding no effect and some finding small possible effects). Some studies have noticed a small increase in the chance for some pregnancy related problems including preeclampsia, preterm birth (birth before 37 weeks), low birth weight (weighing less than 5 pounds, 8 ounces (2500g) at birth) and heavy bleeding following delivery if sumatriptan was used late in pregnancy. Some of these outcomes including preterm birth and low birth weight have been associated with migraines in pregnancy. It is not yet clear if these outcomes were due to the migraines or the medications or a combination of both.

## ***Does taking sumatriptan in pregnancy affect future behavior or learning for the child?***

Studies have not been done to see if sumatriptan can cause behavior or learning issues for the child.

There is limited information regarding long-term effects on children who were exposed to drugs like sumatriptan during pregnancy. Although an initial study that followed children to age 3 years suggested there could be small effects with attention, the same authors did not find behavior differences at age 5 years in children who were exposed to a medication in the same class as sumatriptan.

## ***Breastfeeding while taking sumatriptan:***

Sumatriptan gets into breastmilk in small amounts. Since sumatriptan is not well absorbed by the gut, some of the medication that gets into the breast milk would be less likely to enter the baby's system. It is possible that premature babies (born before 37 weeks) with digestive systems that are not fully developed may be able to absorb more of the medication through breast milk. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

***If a male takes sumatriptan, could it affect fertility (ability to get partner pregnant) or increase the chance of birth defects?***

There are no studies looking at possible risks to a pregnancy when a person assigned male at birth uses sumatriptan. In general, exposures these individuals 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](https://mothertobaby.org).**

---

Disclaimer: MotherToBaby Fact Sheets are meant for general information purposes and should not replace the advice of your health care provider. MotherToBaby is a service of the non-profit Organization of Teratology Information Specialists (OTIS). *OTIS/MotherToBaby encourages inclusive and person-centered language. While our name still contains a reference to mothers, we are updating our resources with more inclusive terms. Use of the term mother or maternal refers to a person who is pregnant. Use of the term father or paternal refers to a person who contributes sperm.* Copyright by OTIS, November 1, 2021.