Temazepam (Restoril®)

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

What is temazepam?

Temazepam (Restoril®) 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. MotherToBaby has a general fact sheet on benzodiazepines at [https://mothertobaby.org/fact-sheets/benzodiazepines-pregnancy/pdf/](https://mothertobaby.org/fact-sheets/benzodiazepines-pregnancy/pdf/).

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

Studies have not looked at whether using temazepam could make it harder to get pregnant.

Should I stop taking temazepam once I find out that I am pregnant?

Talk with your healthcare providers before making any changes to this medication. If you take this medication regularly and then suddenly stop taking it, you could have withdrawal symptoms. We don’t know what effects withdrawal would have on a pregnancy. Your healthcare providers can help you decide if the benefit of taking this medication outweighs any possible risk to your pregnancy.

Does taking temazepam increase the chance for miscarriage?

Miscarriage can occur in any pregnancy. Studies have not been done to see if temazepam could increase the chance for a miscarriage.

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

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. Temazepam has not been studied among women for use in the first trimester. Experimental animal studies did not find a higher chance for birth defects with exposure to temazepam.

I’ve heard that taking a benzodiazepine can cause birth defects like cleft lip and palate. Is this true?

Some early studies on benzodiazepine use in pregnancy suggested a slight increase in the chance for cleft lip and/or cleft palate if taken during the first trimester. (A cleft lip or cleft palate happens when the top lip and/or roof of the mouth do not form correctly and can need surgery to correct). Since the early reports, there have been newer studies and reviews that have not found any increase in birth defects with the use of a benzodiazepine during the first trimester.*

Could temazepam cause other pregnancy complications?

If a woman is taking a benzodiazepine near the time of delivery, then a newborn might have withdrawal symptoms. If temazepam is used at the end of pregnancy, the baby can be monitored for poor muscle tone and difficulty feeding.*

Someone told me not to take my benzodiazepine with my allergy medication diphenhydramine. Why not?

A single human report and animal data have suggested that the combination of two medications: temazepam and diphenhydramine (Benadryl®) might increase the chance for stillbirth or for infant death shortly after birth. Women taking temazepam should talk with their healthcare provider before taking diphenhydramine during their pregnancy.

*Several studies have been done on temazepam use during pregnancy. However, a lot more research needs to be done to determine if there is a link between temazepam use and birth defects.
**Will taking temazepam during pregnancy affect my baby’s behavior or cause learning problems?**

Temazepam has not been studied to see if taking it during a pregnancy would affect the child’s behavior or development.

**Can I breastfeed my baby if I take temazepam?**

Temazepam has not been well studied for use while breastfeeding. Small amounts of temazepam can get into breast milk after single intravenous doses. Reports on 13 infants who were breastfeeding while their mothers took temazepam did not report any health concerns. Talk with your healthcare providers about your breastfeeding questions.

**What if the baby’s father takes temazepam?**

Temazepam has not been studied for use in men who are trying to get a partner pregnant. 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/](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/).

* Section Updated May 2020

**Selected References:**