

Temazepam (Restoril®)

This sheet is 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.

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.

I just found out I am pregnant. Should I stop taking temazepam?

Talk with your healthcare providers before making any changes to how you take your medication. If you take this medication regularly and then suddenly stop taking it (called “cold turkey”), you could have withdrawal symptoms. It is not known what effects, if any, withdrawal could have on a pregnancy.

The product label for temazepam recommends women who are pregnant not use this medication during pregnancy. This is because there is concern based on the use of other medications like temazepam. However, the benefits of using this medication should be weighed against the risks of an untreated condition. Your healthcare provider can talk with you about using temazepam and what treatment is best for you.

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 birth defects?

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. Experimental animal studies did not find a higher chance for birth defects with exposure to temazepam.

There was no increase in the chance for birth defects in one study involving 379 children exposed to temazepam during the first trimester of pregnancy.

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.

Could temazepam cause other pregnancy complications?

If a woman who is pregnant is taking a benzodiazepine near the time of delivery, a newborn might have withdrawal symptoms. Symptoms can include trouble breathing, muscle weakness, irritability, a lot of crying, trouble sleeping, tremors, and jitteriness. If temazepam is used at the end of pregnancy, the baby can be monitored for these symptoms.

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

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. Women 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 during pregnancy cause long-term problems in behavior or learning for the baby?

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

Can I breastfeed while taking temazepam?

Temazepam has not been well studied for use while breastfeeding. Only small amounts of temazepam get into breast milk after single intravenous doses. Reports on 13 infants who were exposed to temazepam through breast milk did not suggest any health concerns. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

If a man takes temazepam can it make it harder to get a woman pregnant or increase the chance for birth defects?

Temazepam and its possible effects on a man's fertility has not been studied. 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](https://mothertobaby.org).

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