Tirzepatide (Mounjaro®, Zepbound®)

This sheet is about exposure to tirzepatide 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 tirzepatide?

Tirzepatide is a medication that has been used to improve blood sugar control in adults with type 2 diabetes and to treat obesity. Brand names include Mounjaro® (used for type 2 diabetes) and Zepbound® (used for weight management).

If you are using tirzepatide, 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. Weight loss is not generally recommended during pregnancy.

Obesity and elevated blood glucose can make it harder to get pregnant, and increase the chance of miscarriage, birth defects, or other pregnancy complications. MotherToBaby has information sheets on diabetes https://mothertobaby.org/fact-sheets/type-1-and-type-2-diabetes/ and obesity https://mothertobaby.org/fact-sheets/obesity-pregnancy/.

The product label for tirzepatide states the use of this medication might change the way oral contraceptives (birth control pills used to prevent pregnancy) are absorbed by the body. This might increase the chance of pregnancy, even if the oral birth control is taken correctly. The product label suggests women using oral contraceptives switch to a non-oral birth control or add a barrier method of contraception (like condoms) for 4 weeks after starting the medication and for 4 weeks after each increase in dose. If you are taking this medication, talk with your healthcare provider about non-oral birth control and all your options for preventing a pregnancy.

I am taking tirzepatide, but I would like to stop taking it before getting pregnant. How long does the drug stay in my body?

The time it takes to metabolize (break down) medication is not the same for everyone. In healthy adults, it can take up to 30 days, on average, for most of the tirzepatide to be gone from the body.

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

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

Does taking tirzepatide increase the chance of miscarriage?

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

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

Research studies have not been done to see if tirzepatide increases the chance of birth defects in humans. In animal studies, an increased chance for some birth defects was seen. However, it is unclear if these birth defects were due to the medication or other factors in the study (such as weight loss, or poorly controlled diabetes). Diabetes with unmet glucose goals in pregnancy can increase the chance of birth defects. It is important that diabetes is managed during pregnancy and glucose levels stay in your goal/target range throughout pregnancy.

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

Human studies have not been done to see if tirzepatide 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). Animal studies reported a decrease in the weight of the offspring after exposure to tirzepatide in pregnancy. It is unclear if this was due to the medication, weight loss in the mother, or other factors. Diabetes with unmet glucose goals/targets in pregnancy can increase the chance of pregnancy complications.

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

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

Breastfeeding while taking tirzepatide:

Tirzepatide has not been well studied for use during breastfeeding. Tirzepatide might pass into breast milk in very small amounts. Any of the tirzepatide in breast milk is likely to break down in the infant's gastrointestinal (GI) tract and not be well-absorbed by the infant. If you suspect the baby has any symptoms, contact the child's healthcare provider. Be sure to talk to your healthcare providers about all your breastfeeding questions.

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

Studies have not been done in humans to see if tirzepatide could affect male fertility (ability to make healthy sperm) or increase the chance of birth defects above the background risk. There were no changes in male fertility reported in one animal study. 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.

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