



MotherToBaby

Medications & More During Pregnancy & Breastfeeding
Ask The Experts

Fact Sheet

by the **Organization of Teratology Information Specialists (OTIS)**

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Trazodone (Desyrel®)

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. This sheet talks about whether exposure to trazodone/nefazodone may increase the risk for birth defects over that background risk. This information should not take the place of medical care and advice from your health care provider.

What is trazodone?

Trazodone is a medication that has been used to treat depression and symptoms of insomnia (unable to sleep or having poor sleep). It is often used in combination with other medications used to treat depression.. Brand names for trazodone include Desyrel®, Oleptro®, and Trazorel®.

Can taking trazodone make it more difficult for me to become pregnant?

We have not located studies that have looked at whether trazodone could make it harder for a woman to get pregnant.

I take trazodone and I am already pregnant. Should I stop taking my medication?

No. You should always speak with your healthcare provider before making any changes in your medication. If you do decide to stop taking trazodone after talking to your healthcare provider, you should gradually decrease the dose. The drug label says that if it is stopped abruptly, there is a chance of withdrawal symptoms including agitation, anxiety and sleep problems.

Can taking trazodone cause a miscarriage?

There are no published studies looking at whether trazodone increases the chance of miscarriage. This does not mean there is an increased chance or that there is no increased chance, it only means that this question has not been answered.

Can taking trazodone during my pregnancy cause birth defects?

It is unlikely. Three small studies that looked at a total of 187 pregnancies did not find an increase in the chance of birth defects.

Can taking trazodone during my pregnancy cause pregnancy complications?

One small study found no greater chance for preterm delivery (delivery before week 37) or low birth weight of babies whose mothers had taken trazodone during pregnancy.

Will taking trazodone have any effect on my baby's behavior and development?

We don't know. There are no studies on the behavior or development of infants exposed to these drugs during pregnancy. Long-term studies are needed in order to determine if there are any adverse effects on the baby's behavior and development.

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

Antidepressant use late in pregnancy has been associated with an increase chance for withdrawal symptoms in the baby. These include: jitteriness, breathing problems, or difficulty feeding. These symptoms are usually mild and go away without treatment. However, in one small study of 18 infants whose mothers took 50 mg/day of trazodone for insomnia in the 3rd trimester, withdrawal effects were not observed.

Can I take trazodone while breastfeeding?

Only small amounts of trazodone have been found in breast milk. There are no studies looking at the use of trazodone while breastfeeding. There was a report on one child with typical development measured at age 1 year whose mother breastfed while taking trazodone starting at 4 weeks after delivery and continuing for 12 weeks. Be sure to talk to your healthcare provider about all your breastfeeding questions.

What if the father of the baby takes trazodone?

There are no studies looking at pregnancy outcomes following the use of trazodone by the father. 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 and Pregnancy at <https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/>.

Selected References:

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