Vilazodone (Viibryd®)

This sheet is about exposure to vilazodone in pregnancy and while breastfeeding. This information is based on available published literature. It should not take the place of medical care and advice from your healthcare provider.

What is vilazodone?

Vilazodone is a medication that has been used to treat major depressive disorder. A brand name is Viibryd®.

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

Research has shown that when depression is left untreated during pregnancy, there could be an increased chance for pregnancy complications. For more information, please see our fact sheet on depression at https://mothertobaby.org/fact-sheets/depression-pregnancy/.

Some women may have a return of their symptoms (relapse) if they stop this medication during pregnancy. If you plan to stop this medication, your healthcare provider might suggest that you slowly lower the dose instead of stopping all at once. Stopping this medication suddenly can cause some people to have withdrawal symptoms. It is not known if or how withdrawal might affect a pregnancy.

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

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

Does taking vilazodone increase the chance for miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies have not been done to see if vilazodone increases the chance for miscarriage. However, depression itself might increase the chance for miscarriage.

Does taking vilazodone 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. Animal studies did not find an increased chance of birth defects. We have been unable to locate studies on the use of vilazodone in human pregnancies.

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

Studies have not been done to see if vilazodone can cause other 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).

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

It is not known if the use of vilazodone during pregnancy can cause withdrawal symptoms in a baby after birth. The use of other antidepressants during pregnancy has been associated with temporary symptoms in some newborns after birth. These symptoms are sometimes referred to as withdrawal. Symptoms may include jitteriness, increased muscle tone, irritability, changes in sleep patterns, tremors, trouble eating, and trouble breathing. These symptoms are usually mild and go away on their own. Some babies may need to stay in a special care nursery for several days. Not all babies exposed to an antidepressant will have these symptoms. It is important that your healthcare providers know you are taking vilazodone so that if symptoms occur your baby can get the best care.

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

Studies have not been done to see if vilazodone use in pregnancy can cause behavior or learning issues for the child.

Breastfeeding while taking vilazodone:

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It is not known if vilazodone gets into breast milk or causes side effects for a baby who receives the milk. The benefit of continuing vilazodone while breastfeeding may outweigh the risks of an untreated mental health condition or the risks of not breastfeeding. Your healthcare provider can talk with you about vilazodone and what treatment is best for you. Be sure to talk to your healthcare provider about all of your breastfeeding guestions.

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

Studies have not been done to see if vilazodone could affect a man's fertility (ability to get a woman pregnant) or increase the chance of birth defects above the background risk. In the clinical trials for this medication, adverse sexual functioning (lack of orgasm and reduced sex drive) was noted in some cases. This could reduce fertility for some men. Also, men with mental health conditions, such as depression, may have lower fertility, which might make it harder for them to get a woman pregnant. In general, exposures that fathers or sperm donors have are unlikely to increase the 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.

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