

Ziprasidone (Geodon®)

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

What is ziprasidone?

Ziprasidone is a medication that has been used to treat bipolar disorder, schizophrenia, and schizoaffective disorder. Ziprasidone belongs to a group of medications called atypical antipsychotics or second-generation antipsychotics. A brand name for ziprasidone is Geodon®.

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

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

A reported side effect of ziprasidone is sexual dysfunction (problems with sexual desire, sexual arousal, orgasms, or sexual pain disorders). If a person has sexual dysfunction, it might make it harder to get pregnant.

Does taking ziprasidone increase the chance for miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. One prescription-based study reported a slightly higher chance of miscarriage among people who were pregnant and filled a prescription for ziprasidone in pregnancy. This type of study cannot tell us if the person used the medication. Also, untreated or uncontrolled mood disorders can increase the chance of miscarriage.

Does taking ziprasidone increase the chance of birth defects?

Every pregnancy starts out with a 3-5% chance of having birth defect. This is called the background risk. Animal studies have raised some concern about a higher chance for birth defects with use of ziprasidone in pregnancy. However, animal studies cannot always predict how a medication would affect a human pregnancy. Studies in humans have not reported an increased chance for birth defects.

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

It is not known if ziprasidone 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 ziprasidone throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?

The use of some medications during pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. It is unknown if taking ziprasidone could increase the chance of withdrawal symptoms in a newborn. However, similar medications have been associated with a chance for withdrawal symptoms. Babies who were exposed to ziprasidone near delivery can be monitored for symptoms such as stiff or floppy muscle tone, drowsiness, agitation, tremors, trouble breathing, and problems with feeding. If a baby develops symptoms, in most cases the symptoms are expected to go away in a few days without long term health effects. It is important that your healthcare providers know you are taking ziprasidone so that if symptoms occur your baby can get the care that is best for them.

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

Studies have not been done to see if ziprasidone can cause behavior or learning issues for the child. There are a few case reports of healthy children with typical development after being exposed to ziprasidone during pregnancy.

Breastfeeding while taking ziprasidone:

Ziprasidone has not been well studied for use while breastfeeding. There is one case report on a person who took



ziprasidone 40 mg and citalopram 60 mg throughout the pregnancy and while breastfeeding. The nursing baby was reported to be healthy and developing well at age 6 months old. Be sure to talk to your healthcare provider about all of your breastfeeding guestions.

If a male takes ziprasidone, could it affect fertility (ability to get my partner pregnant) or increase the chance of birth defects?

There are no well-controlled studies in males exposed to ziprasidone. In general, exposures that fathers or sperm donors 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/.

National Pregnancy Registry for Psychiatric Medications: There is a pregnancy registry for women who take psychiatric medications, such as ziprasidone. For more information you can look at their website: https://womensmentalhealth.org/research/pregnancyregistry/.

Please click here for references.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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