



MotherToBaby

Medications & More During Pregnancy & Breastfeeding
Ask The Experts

Fact Sheet

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

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Zolpidem

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 zolpidem 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 zolpidem?

Zolpidem is a sedative medication used to treat insomnia (not able to fall asleep or stay asleep). It belongs to a group of medications called hypnotic benzodiazepine receptor agonists (HBRAs). Although it interacts with the benzodiazepine receptor, zolpidem is not a benzodiazepine. Brand names are Ambien®, Edluar®, Intermezzo®, and Zolpimist®.

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

No studies have looked at whether zolpidem use by women made it harder for them to get pregnant.

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

You should always talk with your healthcare provider before making any changes to your medication. It is important to consider the potential benefits of taking zolpidem during pregnancy. Sleep is very important for a person's general health. You and your healthcare provider may decide to continue zolpidem, use a different sleep aid during pregnancy, or stop using sleep aids. Some people, who stop this medication suddenly, may have withdrawal symptoms. Symptoms reported include fatigue, nausea, vomiting, flushing, lightheadedness, crying, nervousness and others.

Does taking zolpidem during my pregnancy increase the chance of miscarriage?

There are no studies that looked to see if zolpidem use during pregnancy increased the chance for miscarriage.

Does taking zolpidem during my pregnancy increase the chance of having a baby with a birth defect?

A small number of studies have not found a higher chance of having a baby with a birth defect.

Could zolpidem cause other pregnancy problems?

Studies that looked at pregnancy outcomes other than birth defects found that the women who took zolpidem during pregnancy were slightly more likely (around one and a half times the risk) to deliver early or have smaller babies compared with women who did not take zolpidem during pregnancy. Other studies also reported similar issues but these studies were too small to show any increase in risk. None of these studies fully accounted for the use of other medications, smoking, alcohol, or drug use, or for the underlying medical conditions. Any of these conditions could also increase the chance of early deliveries and smaller than usual babies. Therefore, there is not enough information from any of these studies to know if zolpidem can cause pregnancy complications.

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

There are no studies looking at whether taking zolpidem during pregnancy increases the chance of withdrawal symptoms in the baby. However, withdrawal has been reported in babies whose mothers took benzodiazepines close to delivery. Benzodiazepines are a class of medications similar to zolpidem. The withdrawal symptoms included difficulty breathing, muscle weakness, irritability, crying, difficulty sleeping, tremors, and jitteriness. It is not known if zolpidem use close to delivery can also cause these symptoms in a newborn. It is important that your healthcare provider and your baby's pediatrician know you are taking zolpidem so that if withdrawal happens your baby can get the care he or she needs.

Will taking zolpidem during pregnancy affect my baby's behavior or cause learning problems?

There are no studies that have looked at whether taking zolpidem during pregnancy may affect children's long-term development.

Can I breastfeed my baby if I am taking zolpidem?

Yes. Zolpidem is found in breast milk. In a study of 5 women who took a single 20 mg dose of zolpidem several days after delivery, very little zolpidem was found in their breast milk three hours after taking the medication. No problems were reported in babies whose mothers took zolpidem while breastfeeding in this study. The baby should be observed for evidence of sedation or poor weight gain. Babies who are very young or were born prematurely might be more sensitive to zolpidem in breast milk. Be sure to talk to your health care provider about all your breastfeeding questions. If you suspect that your baby has symptoms caused by zolpidem, contact your baby's health care provider right away.

You may also want to discuss with your health care provider the potential hazards of taking a sleep aid while caring for a newborn infant. You and your doctor may decide that the use of a sleep aid would interfere with your ability to respond to your newborn during the day or at night.

What if the father of the baby takes zolpidem?

There are no studies looking at possible risks to a pregnancy when a father takes zolpidem. 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/>.

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