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Trazodone (Desyrel[®]) and nefazodone (Serzone[®]) and Pregnancy

This sheet talks about the risks that exposure to trazodone/nefazodone can have during pregnancy. With each pregnancy, all women have a 3% to 5% chance of having a baby with a birth defect. This information should not take the place of medical care and advice from your health care provider.

What are trazodone and nefazodone?

Trazodone and nefazodone are antidepressants which are almost exactly the same except nefazodone is much newer. They are unrelated to other classes of antidepressants. Trazodone and nefazodone are also used to treat the symptoms of insomnia, tremors, anxiety disorders, and some pain syndromes. Trazodone is the generic name for Desyrel[®] and nefazodone is the generic name for Serzone[®].

I am taking trazodone/nefazodone, but I would like to stop taking it before becoming pregnant. How long does the drug stay in my body?

While everyone breaks down medication at a different rate, it may take approximately 5 days for either drug to be eliminated from the body once it is stopped.

I take trazodone/nefazodone and I am already pregnant. Should I stop taking it?

You should not stop taking any medication without first talking with your doctor. If you do decide to stop after discussing it with your doctor, you should gradually decrease the dose. These drugs should never be abruptly discontinued.

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

Currently, there are no reports that link these drugs with an inability to become pregnant.

I have heard that trazodone/nefazodone can cause a miscarriage. Is this true?

There has been one study that compared the rates of miscarriage while taking trazodone/nefazodone. Even though there were more miscarriages in the trazodone/nefazodone group they were still within the baseline of expected rates of miscarriages.

Can taking trazodone/nefazodone during my pregnancy cause birth defects?

One study followed 147 women who took trazodone or nefazodone while pregnant. All of these women took the medication in the first trimester of pregnancy and more than a third of patients took the medication throughout the entire pregnancy. There were 58 women were exposed to trazodone and 89 exposed to nefazodone. There was no increase in birth defects above the normal 3-5% risk for the general population. While this study is reassuring, the numbers are not large enough to completely rule out a risk.

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

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/nefazodone throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby?

There have not been any case reports or cases documented in the study that was carried out, that showed a link between these drugs and withdrawal symptoms in the infants. However, all babies who have been exposed during pregnancy to antidepressant drugs should be observed carefully after birth for any signs of withdrawal from the drug.

Can I take trazodone/nefazodone while breastfeeding?

Very small amounts of trazodone have been found in breast milk of women taking the drug. About 0.6% of trazodone passes into the breast milk and is ingested by the infant. There are no case reports that have documented adverse effects from trazodone exposure via breastfeeding. There was one case report of a premature baby, where it was suggested that nefazodone affected the baby adversely through breast milk, however the amount excreted in the milk was even less than trazodone (0.45%) and it was felt that these adverse effects were because the baby was premature.

OTIS is currently conducting a study looking at women who choose to continue or discontinue their antidepressants during pregnancy. If you are interested in taking part in this study, please call 1-877-875-7333.

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References:

Barcellona PS. 1970 Investigations on the possible teratogenic effects of trazodone in rats and rabbits. *Boll Chim Farm* 109:323-332.

Einarson A, et al. 2003 A multicentre prospective controlled study to determine the safety of trazodone and nefazodone use during pregnancy. *Can J Psychiatry* 48(2):106-110.

Froberg KM, et al. 1994. In utero development of a mediastinal teratoma: A second-trimester event. *Prenat Diag* 14:884-887.

Hale T. 2000. Medications and Mother's Milk, 9th ed. Amarillo, TX: Pharmasoft Publishing.

Rivett KF and Barcelona PS. 1974. Toxicology of trazodone. *Mod Probl Pharmacopsychiatry* 9:76-86.

Rosa F. 1994. Medicaid antidepressant pregnancy exposure outcomes. *Reprod Toxicol* 8:444-445.

Verbeeck RK, et al. 1986. Excretion of trazodone in breast milk. *Br J Clin Pharmacol.* 22(3):367-370.

Yapp P, et al. 2000. Drowsiness and poor feeding in a breast-fed infant: association with nefazodone and its metabolites. *Ann Pharmacother* 34(11):1269-1272.

If you have questions about the information on this fact sheet or other exposures during pregnancy, call OTIS at 1-866-626-6847.