

# Prozac During Pregnancy & Breastfeeding

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Many women are taking the drug fluoxetine (prozac) either when they fall pregnant or while they are trying for pregnancy. Prozac is the most widely prescribed antidepressant drug in the world. Over 54 million patients worldwide have been prescribed Prozac for conditions such as depression, obsessive compulsive disorder, bulimia nervosa and panic disorder.

Mothers who become pregnant while taking an antidepressant are forced to make a difficult choice. They ask themselves: Should they stop taking their medication in order to ensure the health of their baby, or should they continue to take their antidepressant to ensure that they don't become depressed?

There is now some research into women who are using prozac during pregnancy and breastfeeding.. There are two concerns with regard to pregnancy and Prozac:

1. whether its use in the first trimester is associated with any risk to the developing fetus - is there an increased risk of congenital abnormalities?
2. Does the use of prozac during pregnancy affect the outcome of the pregnancy or the subsequent development of the fetus?

Research so far does not indicate any increased risk of major fetal abnormalities following exposure to the SSRIs or other newer antidepressants. Although results have been inconsistent, some studies do indicate increased risk of low birth weight babies.

With regard to prozac and breastfeeding - currently there is very little information published to use as a guide. Fluoxetine (Prozac) has a long half-life and it may accumulate in the infant. There is currently no evidence to reassure that breastfeeding is safe and as one paper puts it, it should be a case-specific, risk-benefit decision. There are other antidepressants, such as the tricyclics (eg. amitriptyline), which do not accumulate in the infant, and with which there is more published experience.

Among their findings, as reported in MedPage Today:

Children of mothers with major depression were born at an average of 35.6 weeks compared to 39.4 weeks for mothers who had no history of depression.

Cord blood of the babies born to depressed mothers had more of the stress hormone cortisol, although the difference between their levels and the levels of the babies born to low-risk mothers was not statistically significant.

Given that the test group was relatively small, a larger sampling of babies is necessary to determine what, if any, meaning this may have.

Motor maturity tended to be lower, although again it did not reach a statistically significant level.

With depression also comes an increased risk of the mother not taking proper care of herself or feeling suicidal. Susan (not her real name), a member of our forum community, was determined to do everything possible to ensure her baby's well-being. She ate right, exercised, didn't drink or smoke, never missed a doctor's appointment, and stopped taking her antidepressants "just in case they might hurt the baby". During the seventh month of her pregnancy she began to think that maybe her husband and baby would be better off without her. At that time, she says, "My thoughts made perfect sense. I felt I was a burden to my husband because of my depression and that my baby would be better off being raised by someone without my problems." Her plan, she says, was to wait until the baby was born and then commit suicide. After the baby was born and she had resumed taking Prozac, she said, "I was amazed that I could have thought such things and actually believed that they made sense."

Other keywords:

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