Pregnant Women on Antidepressants Less Likely to Breastfeed

March 08, 2012 |

Researchers Say Results Show Need for Additional Breastfeeding Support and Education Researchers at the California Teratogen Information Service (CTIS) Pregnancy Health Information Line, a statewide non-profit organization based at the University of California, San Diego School of Medicine, have found women exposed to certain antidepressants during pregnancy were significantly less likely to breastfeed their babies compared to unexposed women. The results of the study were recently published online in *The Journal of Human Lactation*.

The study uses data obtained by counselors at the CTIS Pregnancy Health Information Line, a tollfree service offering evidence-based clinical information about exposures during pregnancy and breastfeeding. It focused on 466 pregnant women who contacted the CTIS Pregnancy Health Information Line over a ten year period with questions about a wide variety of exposures and, after being counseled, agreed to participate in a follow-up study of their pregnancy outcome.

The study specifically examines breastfeeding choices of women exposed to selective serotonin reuptake inhibitor (SSRI) antidepressants at the time of delivery, compared to those who discontinued use of antidepressants earlier in pregnancy, as well as to those women who report not taking antidepressants at all. The results showed women exposed to an SSRI anytime in pregnancy were about 60 percent less likely to initiate breastfeeding than women who took no antidepressant.

"While the benefits of breastfeeding an infant are very clear, this study suggests that women who are taking antidepressants in pregnancy are not engaging in this behavior as often as we would like to see," said Christina Chambers PhD, MPH, professor of pediatrics at UC San Diego School of Medicine, CTIS program director, and co-author of the study. "Whether this is due to the mother's fear of harming her baby by breastfeeding while taking the medication, or due to the mother's depression itself is unclear." According to Chambers, regardless of the reason for breastfeeding choice, the study suggests that women who have depressive disorders and/or take antidepressants in pregnancy may require additional encouragement and support when making the choice to breastfeed an infant.

Questions or concerns about antidepressants or any other exposure during pregnancy or breastfeeding can be directed to the CTIS Pregnancy Health Information Line at 800-532-3749 or via instant message counseling at CTISPregnancy.org. Outside of California, please call the Organization of Teratology Information Specialists (OTIS) at 866-626-6847.

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Media Contact: Nicole Chavez, 858-246-1745, ncchavez@ucsd.edu

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