Over-the-Counter (OTC) **Medications During Pregnancy and Lactation**

Over-the-counter (OTC) medicines are medications that you can buy in a pharmacy or store without a doctor's prescription. They come in different forms, including pills, creams, and eye drops.

Are OTC Medications Safe to Take During Pregnancy?

Some are considered safe, but others are not. It depends on:

- The medicine—Experts who research this information make recommendations on the safety of different medicines. Some are deemed lower risk, but others are considered unsafe and could cause harm to a baby or problems during pregnancy. There are also many OTC medicines where experts do not have a definitive answer on their safety. This is because studies have not been done to check the safety of most OTC medicines during pregnancy.
- How far along the pregnancy is—Most birth defects happen in the first few months of pregnancy. If you take an OTC medicine during that time, there is an increased chance that the medicine will harm your baby.

Contact your doctor or nurse before you take any medications while pregnant or breastfeeding to ask if it is safe. You can also get information about the safety of taking certain medicines during pregnancy by calling the **MotherToBaby hotline**, which is free (in the US): **1-866-626-6847**.

Minimize Fetal Exposure During Pregnancy

When treatment is necessary, non-drug methods should be used first. If there are no other options and it is necessary to use medication, those drugs that have a lower risk to the fetus should be tried first. The smallest amount (dose) is recommended for the shortest length of time.



Minimize Infant Exposure When Breastfeeding

Discuss with your provider or pharmacist if a specific medication might require a breast milk substitute or if you may need to time your dose to limit fetal exposure. The LactMed database, produced by the National Library of Medicine, is a free, authoritative reference for lactation compatibility for prescription and over-thecounter drugs. You can find this information on their website, *ncbi.nlm.nih.gov/books/* and search "LactMed."

Combination Products

Many OTC products contain more than one "active ingredient" (the ingredient that has an effect on our bodies). It is important to look at all active ingredients for safety and appropriateness. It is best to avoid combination products while pregnant or breastfeeding and only treat the symptoms you are experiencing.



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BUG SPRAY (Mosquitoes, Gnats)				
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding	
 Long-sleeve shirts and pants 	DEET • Picaridin IR3535 Oil of lemon eucalyptus (OLE) Para-menthane-diol (PMD) 2-undecanon	Compounds containing one of these active ingredients are safe to use as directed on the label.	Compounds containing one of these active ingredients are safe to use as directed on the label.	
	CONST	IPATION		
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding	
 Increase fluids and fiber Exercise 	Bulk-forming laxatives Psyllium (Metamucil®) Methylcellulose (Citrucel®) Docusate Sodium (Colace®)	Preferred treatment options since bulk- forming laxatives are not absorbed by the body. Generally considered safe for the occasional use during pregnancy. Bulk-forming laxatives and non-drug treatments are the preferred options.	Safe to use while breastfeeding. Minimally absorbed from the gastrointestinal tract and therefore the drug is unlikely to be found in the maternal serum or breast milk. Bulk-forming laxatives and non-drug treatments are the preferred options.	
	COL	JGH		
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding	
 Increase fluid intake Humidifier Honey: 1-2 teaspoons taken alone or with tea Hot drinks such as tea 	Cough drops Halls® Ludens®	An adequate and well- controlled study of menthol use during pregnancy has not been conducted. Systemic absorption of lidocaine and benzocaine occurs via mucous membranes of oral cavity.	Has not been studied in breastfeeding. Unknown if present in breast milk.	



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COUGH (Continued)			
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
 Increase fluid intake Humidifier Honey 1-2 teaspoons taken alone or with tea Hot drinks such as tea 	Cough drops Halls® Ludens®	Over-the-counter anesthetic lozenges and sprays (dyclonine, phenol): Fetal harm appears to be unlikely when used appropriately.	Has not been studied in breastfeeding. Unknown if present in breast milk.
	Guaifenesin (an expectorant)	Safe use of guaifenesin in pregnancy has not been established and it is not clear if the drug crosses the placenta. Guaifenesin should only be given to a pregnant woman if clearly needed.	Has not been studied in breastfeeding, but unlikely to cause harm. <i>Avoid products</i> <i>containing alcohol.</i>
		Few studies have been done to evaluate the use of expectorants during pregnancy and thus first trimester use is best avoided.	
	Dextromethorphan (Delsym®, Robitussin DM®)	Generally considered safe for use during pregnancy.	Generally considered safe when breastfeeding.
	Dextromethorphan is available in combination with many other cough and cold remedies.	Consider using alone. <i>Avoid products</i> <i>containing alcohol</i> .	Low amounts of dextromethorphan present in breast milk. <i>Avoid products</i> <i>containing alcohol.</i>
	DIARI	RHEA	
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
 Avoid high-fat, fried foods, milk, and high- fiber foods Maintain adequate hydration 	Bulk-forming laxatives (Metamucil® and Citrucel®)	Preferred treatment options since bulk- forming laxatives are not absorbed by the body. These work by absorbing liquid from the colon.	Safe to use during breastfeeding.
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DIARRHEA (Continued)			
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
 Avoid high-fat, fried foods, milk, and high- fiber foods Maintain adequate hydration 	Loperamide (Imodium A-D®)	May be used in small doses after a trial of other options. Should only be considered in cases that interfere with daily living. <i>If diarrhea persists,</i> <i>contact your provider.</i>	Unknown if present in breast milk. May be used in small doses after a trial of other options. Should only be considered in cases that interfere with daily living. <i>If diarrhea persists,</i> <i>contact your provider.</i>
	GAS / BL	OATING	
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
 Avoid carbonated beverages (soda, sparkling water, fizzy water, etc.) Eat/drink slower 	Simethicone (Gas-X®)	Safe to use; it is not absorbed by the body. Reduces gas bubbles in your body.	Safe to use; it is not absorbed by the body. Reduces gas bubbles in your body.
	HEARTBURN /	ACID REFLUX	
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
 Have smaller meals, caffeine, high-acid, and spicy foods Elevate the head of the bed to help prevent acid reflux 	Calcium carbonate or aluminum hydroxide, magnesium hydroxide, simethicone (Rolaids®, Tums®, Maalox®, Mylanta®, Gaviscon®)	Safe to use during pregnancy. Provides quick relief. Useful for occasional heartburn/acid reflux with dietary and lifestyle changes. If using frequently, discuss with your provider.	Safe to use while breastfeeding.
	Famotidine (Pepcid®)	Useful for chronic heartburn/acid reflux if diet and lifestyle changes do not relieve symptoms.	Present in breast milk and is generally considered safe.
	Omeprazole (Prilosec OTC®)	Generally considered safe in pregnancy. Talk with your provider if you have persistent heartburn/acid reflux and/or famotidine does not help.	Present in breast milk and is generally considered safe.



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HEMORRHOIDS				
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding	
 Maintain adequate hydration and fiber in diet 	Topical Witch Hazel (Tucks®)	Generally considered safe.	Generally considered safe.	
 See Constipation Section—constipation can cause hemorrhoids Soaking in a warm bath or sitz bath (with or without Epsom salt) for 10 to 15 minutes, 3 times a day Avoid sitting for long periods of time 	Topical Hydrocortisone 1% (Cortisone-10®) Topical Phenylephrine (Preparation H®®)	Generally considered safe. Continuous use for longer than 7 days may thin your skin. Talk to your provider if symptoms persist. Generally considered safe. If you have hypertension (high blood pressure) or diabetes, talk to your provider before using.	Unknown if present in breast milk. Generally considered safe. Unknown if present in breast milk. Most topical products have minimal absorption by the body.	
	INSOMNIA / DIFFI	CULTY SLEEPING		
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding	
 Follow a sleep schedule Avoid screens before bed (TV, phones, tablets) Use a pregnancy pillow or place a pillow between your knees, under your stomach, and behind your back 	Melatonin Doxylamine	Crosses the placenta, but is generally considered safe. Safe to use after trial of non-drug treatment options.	Generally considered safe. Melatonin is naturally present in breast milk. Present in breast milk. If used, monitor infant for irritability and drowsiness. Avoid using if infant has apnea or a respiratory condition.	
	Diphenhydramine (Benadryl®)	Doxylamine is preferred over diphenhydramine. If doxylamine does not work, use diphenhydramine at the lowest dose for the shortest amount of time.	Present in breast milk. If used, monitor infant for irritability and drowsiness. Avoid using if infant has apnea or a respiratory condition.	



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ITCHING				
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding	
Moisturizing creams and lotionsOatmeal bath	First Gen Antihistamines: Doxylamine (Unisom®) Chlorpheniramine (Chlor-Trimeton®) Diphenhydramine (Benadryl®)	Safe to use with the lowest dose for the shortest time possible.	Present in breast milk. If used, monitor infant for irritability and drowsiness. Avoid using if infant has apnea or a respiratory condition.	
	Second Gen Antihistamines: Loratadine (Claritin®) or less-sedating Cetirizine (Zyrtec®)	Preferred option when needed. Use the lowest dose for the shortest time possible.	Preferred option when breastfeeding.	
	Topical Hydrocortisone 1% (Cortisone-10®)	Generally considered safe. Continuous use for longer than 7 days may thin your skin. Talk to your provider if your symptoms persist.	Unknown if present in breast milk. Generally considered safe.	
	NASAL CO	NGESTION		
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding	
 Increase fluid intake Humidifier Tea with honey and lemon Saline nasal spray 	Decongestant nasal sprays (Afrin®, Neo- Synephrine®)	Generally considered safe for occasional treatment of nasal congestion. Oxymetazoline (Afrin®) is the preferred agent.	Unknown if present in breast milk. Nasal options are typically preferred while breastfeeding.	
	Pseudoephedrine (Sudafed®)	Avoid using if possible. If necessary, oral options are preferred. Do NOT use during 1st trimester.	Present in breast milk. Generally considered safe to take while breastfeeding. May cause irritability and agitation in infants. May decrease breast milk production during use. Talk to your medical provider or pharmacist for dosage timing.	



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NAUSEA / VOMITING			
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
Saltine crackers before rising out of bedFrequent, small meals	Ginger-containing products	Safe to use: ginger lollipops, ginger tea, and ginger food and/or drinks.	Safe to use.
Adequate fluids	Vitamin B6 (pyridoxine)	1st line: Safe to use.	Safe to use.
Acupressure wristband	Doxylamine with vitamin B6 (pyridoxine)	2nd line : Safe to use.	Present in breast milk. If used, monitor infant for irritability and drowsiness. Avoid using if infant has apnea or a respiratory condition.
	Diphenhydramine (Benadryl®)	3rd line: Safe in small doses for the shortest possible duration. Talk to your provider for other treatment options.	Present in breast milk. If used, monitor infant for irritability and drowsiness. Avoid using if infant has apnea or a respiratory condition.
	PAIN / FEVER	/ HEADACHE	
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
 Non-Drug Treatment(s) Apply hot or cold packs/ splints or wraps to the area that is affected Stay hydrated 	Drug Treatment(s) Acetaminophen (Tylenol®)	Pregnancy Generally considered safe to use for pain and fever. Fevers may be a sign of a problem. Check with your provider for high and/or persistent fevers. Severe headaches may be a sign of preeclampsia. Check with your provider about any new symptoms.	Breastfeeding Present in breast milk. Preferred option for pain control while breastfeeding.
 Apply hot or cold packs/ splints or wraps to the area that is affected 	Acetaminophen	Generally considered safe to use for pain and fever. Fevers may be a sign of a problem. Check with your provider for high and/or persistent fevers. Severe headaches may be a sign of preeclampsia. Check with your provider about any	Present in breast milk. Preferred option for pain control while
 Apply hot or cold packs/ splints or wraps to the area that is affected 	Acetaminophen (Tylenol®) Ibuprofen (Advil®),	Generally considered safe to use for pain and fever. Fevers may be a sign of a problem. Check with your provider for high and/or persistent fevers. Severe headaches may be a sign of preeclampsia. Check with your provider about any new symptoms. AVOID USE unless prescribed by your provider. Have been associated with miscarriage and birth defects when used > 20 weeks gestation. AVOID USE unless prescribed by your provider.	Present in breast milk. Preferred option for pain control while breastfeeding. Generally considered safe. Acetaminophen is the

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SEASONAL ALLERGIES (Itchy, watery eyes, sneezing, nasal congestion)			
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
Saline nasal spray or nasal irrigationExercise can cause	Carboxymethylcellulose eye drops (Artificial Tears)	Can potentially help relieve eye irritation without affecting the fetus.	Can potentially help relieve eye irritation without being present in breast milk.
 nasal vasoconstriction leading to decongestion Cold compresses on eyes Avoidance of triggers 	First Gen Antihistamines: Doxylamine (Unisom®) Chlorpheniramine (Chlor-Trimeton®) Diphenhydramine (Benadryl®)	Safe to use with the lowest dose for the shortest time possible.	Present in breast milk. If used, monitor infant for irritability and drowsiness. Avoid using if infant has apnea or a respiratory condition.
	Second Gen Antihistamines: Loratadine (Claritin®) or less-sedating Cetirizine (Zyrtec®)	Preferred option when needed. Use the lowest dose for the shortest time possible.	Preferred when breastfeeding.
	Cromolyn nasal spray (NasalCrom®)	Is minimally absorbed, has few side effects, and is effective for runny nose due to allergies.	Safe to use while breastfeeding.
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	SORE T		
Non-Drug Treatment(s)	SORE T Drug Treatment(s)		Breastfeeding
Non-Drug Treatment(s) Drink fluids Hot tea 		HROAT	Breastfeeding Not well-studied, but generally considered safe.
Drink fluids	Drug Treatment(s) Benzocaine-containing lozenges (Chloraseptic [®] , Sucrets [®] , Spec-T [®]) Acetaminophen	HROAT Pregnancy Not well-studied, but generally considered safe. Generally considered safe	Not well-studied, but
Drink fluids	Drug Treatment(s) Benzocaine-containing lozenges (Chloraseptic®, Sucrets®, Spec-T®)	HROAT Pregnancy Not well-studied, but generally considered safe.	Not well-studied, but generally considered safe.



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TIRED / SLEEPY / DROWSY			
Non-Drug Treatment(s)	Drug Treatment(s)	Pregnancy	Breastfeeding
 Follow a sleep schedule Aim for 6 to 8 hours of sleep per night 	Caffeine	The American College of Obstetricians and Gynecologists recommends less than 200 mg of caffeine per day (about 2 cups of coffee or about 4 cans of sodas). Caffeine consumption can increase nausea and difficulty sleeping.	Present in breast milk. Moderate consumption has been reported to cause infant irritability, jitteriness, and sleep disturbance.

More Resources

Talk to your provider or pharmacist regarding any questions or concerns. You can also visit **MotherToBaby.org** or **MarchOfDimes.org** for more information.

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