

Amitriptyline

This sheet is about exposure to amitriptyline in a pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

What is amitriptyline?

Amitriptyline belongs to a class of medications known as tricyclic antidepressants. Amitriptyline is approved to treat depression. However, it has also been used to treat pain, tinnitus (noise or ringing sounds in the ear), Irritable bowel syndrome, neuropathy (nerve damage) due to diabetes mellitus, and to treat and prevent migraine headaches. Amitriptyline has been sold under many different brand names. Some brand names are Amarel®, Amitrid®, Elavil®, Endep®, and Vanatrip®. Amitriptyline has also been sold in combination with other medications.

Pregnancy might affect how the body breaks down this medication. For this reason, some people might need to have their medication doses changed as a pregnancy progresses. Your healthcare provider can discuss this with you, if needed.

Sometimes when people find out they are pregnant, they think about changing how they take their medication, or stopping their medication altogether. However, it is important to talk with your healthcare providers before making any changes to how you take this medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy. Some people might have a return of their symptoms (relapse) if they stop taking amitriptyline. If you plan to stop this medication, your healthcare provider may suggest that you slowly lower the dose instead of stopping all at once. Stopping this medication suddenly can cause some people to have withdrawal symptoms.

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

Studies have not been done to see if amitriptyline could make it harder to get pregnant.

Does taking amitriptyline increase the chance for miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Based on the studies reviewed, it is not known if amitriptyline increases the chance for miscarriage. However, depression itself might increase the chance for miscarriage.

Does taking amitriptyline increase the chance of birth defects?

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. Based on the studies reviewed, it is not known if amitriptyline increases the chance for birth defects above the background risk. A small number of human studies have not found a higher chance for birth defects with doses of amitriptyline used for treatment of depression.

Does taking amitriptyline in pregnancy increase the chance of other pregnancy related problems?

One report found a small increased chance of preeclampsia (a pregnancy related condition that can cause symptoms such as high blood pressure and kidney problems in the pregnant person) when amitriptyline was used in the second and third trimester of pregnancy. Studies have not been done to see if amitriptyline increases the chance for other pregnancy-related problems such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth). However, research has shown that when depression is left untreated during pregnancy, there could be an increased chance for pregnancy complications. This makes it hard to know if it is the medication, untreated depression or factors that are increasing the chance for these problems. For more information, please see our fact sheet on Depression at <https://mothertobaby.org/fact-sheets/depression-pregnancy/>.

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

Studies have not been done to see if amitriptyline use in pregnant might lead to withdrawal or toxicity in a newborn soon after delivery. There is one case report of an infant who had temporary withdrawal symptoms after being exposed throughout pregnancy. The infant and the mother were found to have high blood levels of amitriptyline.

Some babies exposed to other tricyclic antidepressant class medications in pregnancy have been reported to have withdrawal symptoms in the newborn period. The symptoms seen during the first month of life included colic, low oxygen levels, breathing problems, and irritability. If a baby developed these symptoms, in most cases the symptoms would go away in a few days without any long-term health effects.

Does taking amitriptyline in pregnancy affect future behavior or learning for the child?

One study looking at 29 children exposed to amitriptyline during pregnancy did not find any behavioral or learning problems.

Breastfeeding while taking amitriptyline:

Amitriptyline gets into breast milk in small amounts. There are several reports of the use of amitriptyline being used during breastfeeding. No side effects in nursing infants have been reported with a dose between 75 mg to 175 mg per day.

There was one report of a person who was taking 10 mg of amitriptyline per day while breastfeeding. The breastfeeding baby (15 days old) was reported to be very sleepy. When the medication was stopped, the infant's symptom resolved.

If you suspect that your baby has symptoms of sleepiness or sedation, or have other concerns, contact the child's healthcare provider. Be sure to talk with your healthcare providers about your breastfeeding questions

If a male takes amitriptyline, could it affect fertility (ability to get partner pregnant) or increase the chance of birth defects?

In some studies, it was reported that amitriptyline lowered sex drive and caused sexual dysfunction in males, which may make it harder to get a partner pregnant. These problems can also be side effects of untreated depression. Studies have not been done to see if amitriptyline could increase the chance of birth defects. In general, exposures that fathers or sperm donors have are unlikely to increase the risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at <https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/>.

National Pregnancy Registry for Psychiatric Medications: There is a pregnancy registry for women who take psychiatric medications, such as amitriptyline. For more information you can look at their website: <https://womensmentalhealth.org/clinical-and-research-programs/pregnancyregistry/>.

Please click here for references.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://mothertobaby.org).

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