

Copolymer 1 (Glatiramer acetate; Glatiramer)

This sheet is about exposure to copolymer 1 in pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

What is copolymer 1?

Copolymer 1 (also known as Cop-1, glatiramer acetate, or glatiramer) is a disease modifying therapy (DMT) that has been used to treat relapsing-remitting multiple sclerosis (RRMS). The brand name is Copaxone®. For more information about multiple sclerosis, please see the MotherToBaby fact sheet at <https://mothertobaby.org/fact-sheets/multiple-sclerosis/>.

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.

I take copolymer 1. Can it make it harder for me to get pregnant?

It is not known if copolymer 1 can make it harder to get pregnant.

Does taking copolymer 1 increase the chance for miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Available information does not suggest that copolymer 1 increases the chance for miscarriage.

Does taking copolymer 1 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. Information from several studies (including one study looking at over 5,000 pregnancies exposed to copolymer 1) does not suggest an increased chance of birth defects above the background risk.

Other studies have suggested possible increased chances of certain birth defects (heart defects, gastrointestinal tract defects, clubfoot, hip dysplasia, and limb abnormalities). However, these studies did not identify a specific pattern of birth defects. It is not known if these findings are due to the medication or other factors.

Does taking copolymer 1 in pregnancy increase the chance of other pregnancy-related problems?

Based on the studies reviewed, copolymer 1 is not expected to increase the chance of 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).

Does taking copolymer 1 in pregnancy affect future behavior or learning for the child?

One study did not find differences in learning or motor development between children exposed to certain DMT medications during pregnancy (including copolymer 1) and those who were not exposed to these medications.

Breastfeeding while taking copolymer 1:

The amount of copolymer 1 that passes into breastmilk is low. There are reports of children exposed to copolymer 1 through breast milk without side effects. Be sure to talk to your healthcare provider about all your breastfeeding questions.

If a male takes copolymer 1, could it affect fertility (ability to get partner pregnant) or increase the chance of birth defects?

Studies have not been done to see if copolymer 1 could affect male fertility. Available studies found no significant or clear evidence of an increased chance of low birthweight, miscarriage, birth defects, or other pregnancy problems when a male takes copolymer 1. In general, exposures that fathers or sperm donors have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at

<https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/>.

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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