

Cephalosporins

The safety of cephalosporins during pregnancy or breastfeeding

The information provided below is for readers based in the United States of America. Readers outside of the United States of America should seek the information from local sources.

THIS MEDICATION CAN CAUSE HARM TO YOUR BABY:

Cephalosporins are considered to be a low risk medication when used during pregnancy, but there has been some evidence that they may increase the risk of birth defects. Cephalosporins should only be used during pregnancy if medically necessary.

What are cephalosporins?

Cephalosporins are antibiotics that treat infections caused by bacteria. These medications are available as oral tablets, oral liquids, or intravenous solutions that are injected into a vein in your arm by a healthcare professional. There are many different cephalosporins available, including cefazolin, cefuroxime, cefoxitin, cefotetan, ceftriaxone, cefotaxime, cefepime, ceftazidime, and ceftaroline. These medications are only available by prescription from your doctor.

What are cephalosporins used to treat?

Cephalosporins are used to treat bacterial infections. They are effective against a wide range of infections, including urinary, skin, bone, respiratory, heart, and blood infections.

How do cephalosporins work?

Cephalosporins kill bacteria or stop their growth by preventing them from building components that are necessary for their protection and survival.

If I am taking a cephalosporin, can it harm my baby?

There is limited data available on the safety of cephalosporins during pregnancy. The FDA recommends that these medications should only be used during pregnancy if medically necessary. One study found that there may be an increased risk of birth defects with the use of cephalosporins

during pregnancy, but other studies did not find this increased risk. **Some experts consider many of the cephalosporins to be compatible with pregnancy.** Your doctor will determine if a cephalosporin is medically necessary for your treatment. Untreated bacterial infections can lead to complications and cause harm to both you and your baby. In some cases, your doctor may determine that treatment of the bacterial infection is more beneficial than the potential harm of these medications.

Evidence:

A study that looked at data from the Hungarian Case-Control Surveillance of Congenital Anomalies compared pregnancy outcomes from 764 expecting moms who took a cephalosporin. They found that the use of cephalosporins during pregnancy was associated with a higher risk of birth defects in the heart. Overall, the study concluded that cephalosporins did not pose a significant risk for birth defects.

Another study that looked at 106 expecting moms who received cefuroxime during the first trimester of pregnancy did not find that the drug was associated with an increased rate of birth defects.

A surveillance study looked at 3,613 babies whose moms used cephalexin during the first trimester of pregnancy. They found that cephalexin was associated with a higher rate of birth defects, including birth defects in the heart, oral clefts (birth defects in the baby's lip or mouth), and total birth defects. Another cephalosporin (cephadrine) was associated with a similar risk of birth defects, but cefadroxil was not. This study did not look at other medications or at the medical conditions and diseases that the moms had at the time of pregnancy. Therefore, other factors may have been involved in the higher risk of birth defects that this study observed.

Bottom line: **There is very little evidence available on the safety of cephalosporins during pregnancy. One study found that there may be an association between the use of cephalosporins during pregnancy and birth defects, but other studies did not find an increased risk of birth defects.** Cephalosporins should only be used during pregnancy if medically necessary.

If I am taking a cephalosporin and become pregnant, what should I do?

If you become pregnant while taking a cephalosporin, you should contact your doctor immediately. Your doctor may decide to discontinue your medication or prescribe an alternative antibiotic.

If I am taking a cephalosporin, can I safely breastfeed my baby?

The FDA recommends that cephalosporins should be used cautiously in moms who are nursing. There is very little evidence on the safety of these medications in the breastfed baby. Cephalosporins pass into breast milk in small amounts and are unlikely to harm the breastfed baby. There have been some

reports of breastfed babies developing diarrhea and thrush (a type of fungal infection) when moms used cephalosporins while breastfeeding. The American Academy of Pediatrics has classified several cephalosporins, including cefazolin, cefoxitin, ceftriaxone, cefotaxime, and ceftazidime, as usually compatible with breastfeeding.

Bottom line: **There is very little data on the safety of cephalosporins while breastfeeding. It is recommended to use caution with these medications when nursing.** If your doctor decides that a cephalosporin is medically necessary, you should contact your doctor if you notice any signs of diarrhea or diaper rash in your baby.

If I am taking a cephalosporin, will it be more difficult to get pregnant?

There have been no studies looking at the effects of cephalosporins on fertility in men or women. Antibiotics can sometimes cause oral contraceptives to be less effective. You should contact your doctor prior to taking cephalosporins with oral contraceptives because a back-up contraceptive method may be required.

If I am taking a cephalosporin, what should I know?

Cephalosporins should only be used during pregnancy if medically necessary. There is very little data available on the safety of these medications during pregnancy. Although some studies have not found an increased risk of birth defects when cephalosporins were used during pregnancy, one study found an increased risk associated with these medications.

Cephalosporins should be used cautiously in nursing moms. The limited evidence available for their use while breastfeeding consists of only a few case reports. There have been some reports of diarrhea and thrush in the breastfed baby when cephalosporins were used while nursing. If your doctor determines that these medications are medically necessary, you should contact your doctor if you notice any signs of diarrhea or diaper rash in your baby.

If I am taking any medication, what should I know?

This report provides a summary of available information about the use of cephalosporins during pregnancy and breastfeeding. Content is from the product label unless otherwise indicated.

You may find Pregistry's expert reports about infections [here](#), and reports about the individual medications used to treat infections [here](#). Additional information can also be found in the resources below.

For more information about **cephalosporins** during and after pregnancy, contact <http://www.womenshealth.gov/> (800-994-9662 [TDD: 888-220-5446]) or check the following link:

UpToDate: [Cephalosporins](#)

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General information

It is very common for women to worry about having a miscarriage or giving birth to a child with a birth defect while they are pregnant. Many decisions that women make about their health during pregnancy are made with these concerns in mind.

For many women these concerns are very real. As many as 1 in 5 pregnancies end in a miscarriage, and 1 in 33 babies are born with a birth defect. These rates are considered the background population risk, which means they do not take into consideration anything about the health of the mom, the medications she is taking, or the family history of the mom or the baby's dad. A number of different things can increase these risks, including taking certain medications during pregnancy.

It is known that most medications, including over-the-counter medications, taken during pregnancy do get passed on to the baby. Fortunately, most medicines are not harmful to the baby and can be safely taken during pregnancy. But there are some that are known to be harmful to a baby's normal development and growth, especially when they are taken during certain times of the pregnancy. Because of this, it is important to talk with your doctor or midwife about any medications you are taking, ideally before you even try to get pregnant.

If a doctor other than the one caring for your pregnancy recommends that you start a new medicine while you are pregnant, it is important that you let them know you are pregnant.

If you do need to take a new medication while pregnant, it is important to discuss the possible risks the medicine may pose on your pregnancy with your doctor or midwife. They can help you understand the benefits and the risks of taking the medicine.

Ultimately, the decision to start, stop, or change medications during pregnancy is up to you to make, along with input from your doctor or midwife. If you do take medications during pregnancy, be sure to keep track of all the medications you are taking.

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