A guide to help you choose between the medicines to help the symptoms of ADHD in pregnancy and breastfeeding

This is a general guide. You must also talk to, and get advice and information from, a healthcare professional about all the options open to you.

There are also fact sheets for most of the medicines, with much more specific information

Any decision should be made thinking about what is best for you and your baby:

- If possible, talk to a healthcare professional *before* becoming pregnant
- If the pregnancy is unplanned see a healthcare professional as soon as you know
- Do **not** stop your medicines suddenly, unless told to by a healthcare professional.

Here are some facts and figures:

- Taking a medicine during pregnancy or when breastfeeding will have risks and benefits. No decision is completely risk-free
- Both you and your baby will do better if you can be as well as possible
- Risks are risks i.e. they do **not** happen in everyone, and many problems can be managed if they are known about in advance
- There will be a risk to mum and baby from taking a medicine during pregnancy…
- **But** there is also a risk of **not** being treated (and getting unwell again)
- There can be risks from stopping *some* medicines suddenly
- There are risks in all pregnancies (whether taking a medication or not) – no decision is completely risk free as these risks exist for all women
  - 2-3% risk of a major malformation
  - 10-20% risk of miscarriage
  - 0.5% risk of stillbirth.

ADHD and pregnancy:

- There is limited information about the impact of ADHD in pregnancy, especially untreated ADHD.
- The information we do have suggests that women with ADHD may have a higher risk of pregnancy and birth complications, such as pre-eclampsia, infection and caesarean section.
- Untreated ADHD for some people could mean an incidence of risky behaviours which may have a negative impact on pregnancy (e.g., smoking, alcohol, recreational drug use etc.).
- ADHD often manifests as anxiety-type behaviours in females and therefore it is important to ensure this is well-controlled in preparation for caring for a baby.

Babies do better with well mums.

Weighing up the risks to make an informed decision

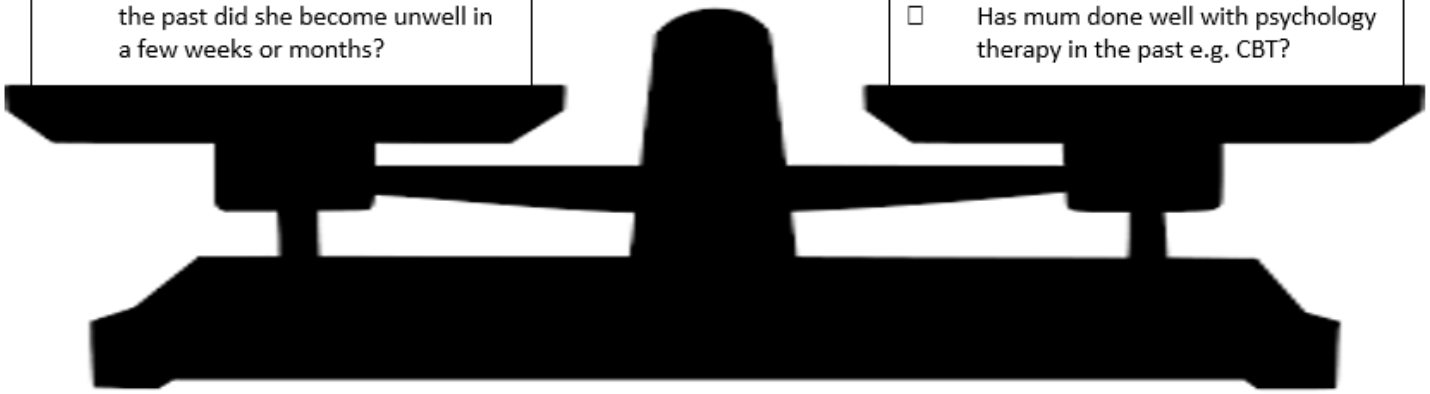
A healthcare professional can help you to think carefully about taking medicines. To help you weigh up the pros and cons of taking medicines have a look at the scales below. Medicines should probably best be continued when the benefits are greater than the risks:

Any 'YES' to these **reduces** your chances of doing well without medicines:

- ☐ Has mum had any recent stresses or life events?
- ☐ Has mum been unwell several times before?
- ☐ Does mum become very unwell?
- ☐ Does mum become unwell quickly?
- ☐ Does it take several medicines to get mum well again?
- ☐ Was mum unwell for several months?
- ☐ When mum has been unwell has this had a big effect on family, friends, job or money?
- ☐ If mum has stopped medicines in the past did she become unwell in a few weeks or months?

Any 'YES' to these **increases** your chances of doing well with medicines:

- ☐ Does mum notice if she is getting unwell and get help?
- ☐ Do other people notice if mum is getting unwell and get help?
- ☐ If medicines are restarted does mum get better quickly e.g. in a few weeks?
- ☐ Does mum have good family and carer support?
- ☐ Is mum happy about being pregnant?
- ☐ Has mum's mental health been stable for at least the last year or so?
- ☐ Do medicines help mum get better?
- ☐ Has mum done well with psychology therapy in the past e.g. CBT?



What sort of risks are there with ADHD medicines in pregnancy and breastfeeding?

Stage	Possible problems for all mental health medicines	ADHD medication specific problems (see individual medicine leaflets for more info)
Fertility	• A few medicines can reduce the chances of you getting pregnant in the first place	• ADHD medication is **not** known to affect women's fertility (although there isn't much information available) • See individual medicine leaflets for more details
1st trimester (months 1-3 or weeks 2-16)	• The first trimester is when the baby is forming • This is the highest risk time for physical malformations or defects	• ADHD medicines are **not** thought to cause malformations • An increased risk of miscarriage has been seen in some studies of methylphenidate (but this has also been seen for untreated ADHD so we don't know if this is all due to the medication) • See individual medicine leaflets for more details
2nd and 3rd trimesters (months 4-9; weeks 17-term)	• This is the main time of growth for the baby • Medicines for the mum may become less effective because of changes to the body (or sometimes more effective) • There is a risk of the baby being stillborn or there being a miscarriage	• A small increased risk of preterm births has been seen in some studies (but not all) for dexamfetamine/lisdexamfetamine • See individual medicine leaflets for more details
Birth	• Withdrawal symptoms from some medicines can occur in the baby • Risk of bleeding	• Most areas will recommend giving birth in hospital if you are taking ADHD medication • Taking ADHD medication in the weeks before giving birth may have a risk of 'neonatal withdrawal syndrome' but this is usually only lasts for a few days – we don't have any information to know either way but from the way the medication works, it may be possible • See individual medicine leaflets for more details
Breastfeeding	• Medicines can get into the baby in the milk • Some can make it harder to breastfeed or for the baby to sleep • If baby is born early or has any problems, they may be at a higher risk of problems from medicines if breastfeeding	• There isn't a lot of information but most commonly used ADHD medication should be compatible with breastfeeding • If your baby is born early or has other problems, speak to a healthcare professional before breastfeeding whilst taking a medicines to make sure it's still ok • See individual medicine leaflets for more details
Postnatal development	• These are any effects the medicine may have on the baby's brain development, behaviour or bonding with you.	• One study of nearly 900 pregnancies followed up for a number of years did **not** increase the risk of neurodevelopmental disorders (e.g. ADHD, autism, learning disabilities etc) in children • If you are well mentally well then problems are less likely • Tell a healthcare professional if you think there may be something wrong. • See individual medicine leaflets for more details

How you can help yourself

- Plan in advance if you can. If not, get advice as soon as you know you are pregnant
- Eat a healthy, balanced diet and take vitamin supplements e.g. iron and folic acid at a dose recommended by a healthcare professional
- Do **not** stop any medicines suddenly
- Take the lowest **effective** dose for you
- Don't take medicines you don't really need
- Stop smoking and stop drinking alcohol if possible, or at least cut right down
- Get regular sleep or rest
- Find some time each week to do something enjoyable and relaxing for yourself
- Let family and friends help you with housework, shopping and other chores
- Exercise - ask about exercise in pregnancy and local exercise classes
- Attend antenatal classes to meet other pregnant people
- Discuss any worries you may have with your family, friends, your midwife or GP
- Talking therapies can be helpful, with or without medicines
- Know what the signs are for you of becoming unwell again. Know who to contact.

Services and professionals who offer help and support during pregnancy

- **Maternity services** – make sure the midwife knows about any mental health problems. Go to all your antenatal appointments during pregnancy. In some areas midwives can do home visits. Most areas will have a specialist midwife for mental health support.
- **GP** – talk to your GP if you have any worries about mental health problems in pregnancy. They will give you information, advice and treatment and refer you to specialist services if needed.
- **Specialist Perinatal Mental Health Services, Community Mental Health Teams (CMHTs) or ADHD services** – Most areas have specialist mental health services for pregnant women and new mums called Perinatal Mental Health Services. Your midwife or GP can refer you. If you work with a CMHT, make sure they know about the pregnancy and tell you what support is available locally. If your area has an ADHD service, they may be able to discuss your treatment options in more depth.
- **Talking therapies and Psychology** – most areas will have access to talking therapies which you should be able to self-refer to (or your GP or midwife should be able to help). These are usually specific to pregnant women or those who have recently given birth.
- **Children and Families Social Services** – you may be referred to Children and Families Social Services. They focus on the child's wellbeing and provide care and support for children and families.
- **Health visitors** – they see all women with new babies and offer advice and help about the baby's health, feeding, sleep and other issues. Health visitors may also visit before the baby is born.

Where you can get further information, help and support:

- **MumsMeetUp** (https://mumsmeetup.com/) An online forum to connect mums locally and across the UK
- **Netmums** (www.netmums.com): a website offering support and information on pregnancy and parenting. There is a section of the website offering support and local resources and support groups
- **Family Action** (www.family-action.org.uk): free helpline: 0808-802-6666 Mon-Fri 9am-9pm as well as text and email support. Includes support and practical help for families affected by mental illness.
- **National Childbirth Trust** (www.nct.org.uk): 0300-330-0770 for infant feeding support. Information online for practical and emotional support on all aspects of pregnancy, birth and early parenthood. Available every day 8am – midnight [membership needed for some sections]
- **Breastfeeding and Medication** (https://breastfeeding-and-medication.co.uk/) helpful factsheets on medication in breastfeeding.

The small print: This leaflet is to help you understand more about medicines for ADHD and pregnancy. You **must** also read the manufacturer's Patient Information Leaflet (PIL) for your medicine(s). Go to our website for fuller answers to these and many other questions.