



STATE OF MICHIGAN

DEPARTMENT OF COMMUNITY HEALTH

LANSING

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GOVERNOR

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DIRECTOR

Dear Health Care Professional:

As you may know, birth defects are a leading cause of infant mortality. The costs, both monetary and non-monetary, to individuals, families, communities and the health care industry are high. In Michigan approximately **10,000** babies are born with a birth defect each year. Nationwide, 120,000 babies are affected annually. To raise awareness of strategies that reduce the risk for birth defects, January is designated National Birth Defects Prevention Month.

Medication use during pregnancy is common; two out of every three women take prescription medications during pregnancy.¹ Despite advances in the study of birth defects related to exposures during pregnancy (teratology), medication use during pregnancy still causes great anxiety and misunderstanding among both the public and health care professionals. This may result in a woman unknowingly taking a medication that may cause a birth defect, or discontinuing medications necessary for treating conditions such as diabetes, asthma or influenza. Health care professionals that are armed with evidence-based information about safe medication use during pregnancy can advise their patients regarding optimal medication therapy, helping to ensure healthy outcomes for both mother and baby.

Because half of all pregnancies are unplanned, ideally all women of reproductive age should receive counseling about the safety of their medication use during pregnancy so that treatment can be optimized *prior* to conception. In addition, because some medications may affect fertility or harm the nursing infant, the preconception, gestation, and lactation periods should be viewed as a continuum. You can help achieve healthy birth outcomes by incorporating these strategies to your practice:

- **Ask women who are of reproductive age about their medication use**, including prescription and over-the-counter medications, as well as herbal remedies.
- **Obtain evidence-based information** about the benefits and potential risks of medication use during pregnancy. Resources providing up-to-date, accurate information that is based on published studies are identified on this website: migeneticsconnection.org/bdmonth11.shtml
- **Consider the importance of treating maternal medical conditions.** Some medical conditions, such as diabetes, asthma and influenza, may pose an increased risk for birth defects or other adverse pregnancy outcomes if untreated.
- **Help patients weigh the risks and benefits of their medication use during pregnancy.** Women who have questions and would like further counseling about their reproductive exposures can be referred to the Organization of Teratology Information Specialists (1-866-626-OTIS; www.otispregnancy.org) or a genetic counselor

- **Recommend consumption of 400 mcg of folic acid daily for all women capable of becoming pregnant, even those not planning a pregnancy.**
- **Encourage all women who are pregnant or planning to become pregnant to get vaccinated for influenza.** Pregnant women are at an increased risk for serious complications from the flu. The flu vaccine given by injection can reduce the need for treatment of influenza and its symptoms during pregnancy.
- **Ask patients about alcohol use** and counsel women about the importance of abstaining from alcohol during pregnancy. There is no known safe amount of alcohol consumption during pregnancy.

You make a difference in the lives of Michigan families and communities when you discuss medication use prior to and during pregnancy. If you have questions or would like more information, please contact the **Michigan Department of Community Health** at 1-866-852-1247 or visit the National Birth Defects Prevention Network at nbdpn.org

Sincerely,



Joan Ehrhardt

Birth Defects Prevention and Referral Program Coordinator

References

¹ Andrade SE, Gurwitz JH, Davis RL, et al. Prescription drug use in pregnancy. *American Journal of Obstetrics and Gynecology*. 2004. 191:398-407.