

Appendix richtlijn mastocytose D: Teratogeniciteit

Group	Medication	Risk Category	Pregnancy Implication	Lactation Implications
First-generation H1 antihistamines	Brompheniramine	C	Increased risk of birth defects	Use with caution
	Chlorpheniramine	C	No increased risk of birth defects	Excreted in breast milk, use with caution
	Dimenhydrinate	B	Crosses placenta, no increased risk of fetal abnormalities	Excreted in breast milk, use with caution
	Diphenhydramine	B	Cross placenta, unclear historical association with cleft palate	Excreted in breast milk, breastfeeding contraindicated
	Doxylamine	C	Historical association with neural tube defects, oral clefts, hypoplastic	Breastfeeding contraindicated
	Hydroxyzine	Not assigned	Crosses placenta, no increased risk of birth defects but not recommended in early pregnancy	Breastfeeding not recommended
	Meclizine	B	No increased risk of birth defects	Unknown if excreted into breast milk
Second-generation H1 antihistamines	Cetirizine	B	No increased risk of birth defects	Excreted in breast milk
	Levocetirizine	B	No increased risk of birth defects	Unknown if excreted into breast milk, not recommended
	Loratadine	B	No increased risk of birth defects, prior historical association with	Small amounts excreted into breast milk
	Fexofenadine	C	Limited information available	Excreted in breast milk
	Desloratadine	C	Adverse side effects in animal studies	Excreted in breast milk
H2 antihistamines	Cimetidine	B	Crosses placenta, no increased risk of birth defects	Excreted in breast milk, breastfeeding not
	Famotidine	B	Crosses placenta, no increased risk of birth defects	Excreted in breast milk, use with caution
	Ranitidine	B	Crosses placenta, no increased risk of birth defects	Excreted in breast milk, use with caution
Mast cell stabilizer	Cromolyn	B	Safe in pregnancy	No data on excretion into breast milk, use with caution
	Ketotifen	C	Adverse events in animal studies	Breastfeeding not
Anti-IgE antibody	Omalizumab	B	No increased risk of birth defects	Likely excreted in breast milk, not recommended
Glucocorticoids	Hydrocortisone	C	Increased risk of oral clefts with use in the first trimester	Excreted in breast milk, wait 4 h after
	Prednisone	C/D	Increased risk of oral clefts with use in the first trimester	Excreted in breast milk
	Betamethasone	C	Increased risk of oral clefts with use in the first trimester, nonfluorinated corticosteroid preferred	Excreted in breast milk, wait 4 h after dose
	Dexamethasone	C	Increased risk of oral clefts with use in the first trimester, nonfluorinated corticosteroid preferred	Excreted in breast milk, wait 4 h after dose
Leukotriene receptor antagonist	Montelukast	B	No increased risk of birth defects	Unknown if excreted into breast milk, use with caution
Cytoreductive therapies	Cladribine	D	Teratogenic effects and fetal mortality observed	Not recommended
	Imatinib	D	Pregnancy not recommended (in mother or father) within 2 wk of last imatinib dose	Not recommended
	Interferon alpha-2b	C	No clear association, contraindicated in combination therapy with ribavirin	Excreted in breast milk

Category A: The safest drugs to take during pregnancy. No known adverse reactions.
 Category B: No risks have been found in humans.
 Category C: Not enough research has been done to determine if these drugs are safe.
 Category D: Adverse reactions have been found in humans.