

Drugs for Allergy and Asthma in Pregnancy

The following list contains medication for patient care during pregnancy recommended by a joint subcommittee of the American College of Allergy, Asthma and Immunology and the American College of Obstetricians and Gynecologists (2000) with revisions by the ACAAI Women's Health Committee.

The committee discussed inclusion of FDA categories but decided against doing so, as the categories are misleading and unhelpful. Most asthma and allergy drugs are rated "C"; meaning animal studies positive or lacking and that human data is lacking. Available human and animal data are noted as **extensive human data available*.

NASAL

- Pseudoephedrine (avoid in 1st trimester)
- Oxymetazoline nasal spray (3-5 days)
- Nasal steroids
 - budesonide*
 - beclomethasone
- Nasal saline irrigation
- Antihistamines
 - chlorpheniramine
 - cetirizine (after 1st trimester)
 - loratadine (after 1st trimester)

ANTIBIOTICS

- penicillin
- erythromycin
- cephalosporins

ASTHMA

- theophylline
- inhaled beta-agonists
- cromolyn
- prednisone (when indicated)
- inhaled steroids
 - budesonide*
 - beclomethasone

OPHTHALMIC

- cromolyn
- nedocromil

COUGH

- guaifenesin
- dextromethorphan

AVOID

- tetracyclines
- iodine
- codeine
- sulfonamides (in late pregnancy)
- aspirin
- oral decongestants (1st trimester)
- quinalones
- epinephrines (except for anaphylaxis)
- Tylenol (3rd trimester)

REFERENCES

- Acetaminophen. Thorax 2002;57:958-963.
- Asthma drug seminars. PERINATOLOGY 2001;25 (3):145-152
- Allergy drugs. Ann Allergy Asthma Immunol. 2000;84:475-478