

Cold, Flu, and COVID-19 Medications During Pregnancy

A guide to over-the-counter medications, prescriptions, and supplements during pregnancy

Over-the-Counter Medications		
MEDICATION	USED FOR	PREGNANCY INFORMATION
Acetaminophen (Tylenol®)	Fever, mild to moderate pain	Recommended choice for pain and fever in pregnancy. Studies have not found a higher chance of birth defects or pregnancy problems if taken for a short time and used as directed. Treating fever during pregnancy is important.
Nonsteroidal anti-inflammatory drugs (NSAIDs): • Ibuprofen (Motrin®, Advil®) • Naproxen (Aleve®) • Regular-strength aspirin	Fever, pain, inflammation	Should be avoided in pregnancy (especially after 20 weeks). These medications can reduce the amount of fluid surrounding the fetus and cause problems with the fetal kidneys, heart, and lungs.
Dextromethorphan (Robitussin®)	Cough	Little research has been done on this medication during pregnancy. Available studies do not suggest it increases the chance of birth defects or pregnancy problems if taken for a short time and used as directed. Avoid liquid medications that contain alcohol.
Guaifenesin (Mucinex®)	Thinning mucus	Little research has been done on this medication during pregnancy. Available studies do not suggest it increases the chance of birth defects or pregnancy problems if taken for a short time and used as directed.
Pseudoephedrine (Sudafed®)	Nasal congestion	A few studies suggest a small increased chance of birth defects when this medication is used in the first trimester, but most other studies have not found an increased chance. There is little information about using it later in pregnancy. If you have high blood pressure, check with your healthcare provider before taking pseudoephedrine.
Phenylephrine (Sudafed PE®)	Nasal congestion	Most studies have not found a higher chance of birth defects when this medication is taken by mouth. There is little information about using it later in pregnancy. If you have high blood pressure, check with your healthcare provider before taking phenylephrine. Studies have shown that taking phenylephrine by mouth does not work well for treating nasal congestion. Using phenylephrine nasal spray is more effective. Also, only a small amount of medication reaches the fetus when using a nasal spray.
Doxylamine	Runny nose, watery eyes, sneezing	This medication has been studied in hundreds of thousands of pregnancies. Studies have not shown a higher chance of birth defects or pregnancy problems.
Loratadine (Claritin®)	Runny nose, watery eyes, sneezing	Studies have not shown a higher chance of birth defects or pregnancy problems when this medication is used as directed.
Diphenhydramine (Benadryl®)	Runny nose, watery eyes, sneezing	Studies have not shown a higher chance of birth defects or pregnancy problems when this medication is used as directed. In rare cases, uterine contractions and fetal death have been reported in the third trimester when the medication is used for a longer time or in higher doses than recommended.
Cetirizine (Zyrtec®)	Runny/stuffy nose	Studies have not shown a higher chance of birth defects or pregnancy problems when this medication is used as directed.
Oxymetazoline (Afrin®)	Nasal congestion	Only a small amount of medication reaches the fetus when using a nasal spray. Studies have not shown a higher chance of birth defects when this medication is used as directed. Do not use for more than 3 days in a row to avoid making congestion even worse.
Camphor, menthol, phenol, benzocaine (Found in cough drops, throat sprays, chest rubs)	Cough, congestion, sore throat	Cough drops, throat sprays, and chest rubs with these ingredients have not been well studied in pregnancy. Using them for a short time and as directed is not thought to increase the chance of birth defects or pregnancy problems. Avoid ongoing use since there is little information about using them in pregnancy.

Antivirals		
MEDICATION	USED FOR	PREGNANCY INFORMATION
Oseltamivir (Tamiflu®) Zanamivir (Relenza®)	Influenza (flu) prevention and treatment	Studies on these medications have not shown a higher chance of birth defects or pregnancy problems when taken as directed. Starting treatment within 48 hours of first symptoms lowers the risk of severe illness from the flu.
Peramivir (Rapivab®) Baloxavir (Xofluza®)	Influenza (flu) prevention and treatment	These medications have not been studied for use in pregnancy. Talk to your healthcare provider about risks and benefits.
Nirmatrelvir/Ritonavir (Paxlovid®)	Treatment of COVID-19 symptoms	Little research has been done on this medication during pregnancy. Available studies do not suggest a higher chance of birth defects or pregnancy problems when taken as directed. Starting treatment within 5 days of first symptoms lowers the risk of severe illness from COVID-19.

Supplements and Homeopathic Products	
These products are not regulated by the FDA for safety and purity in the same way that medications are. There is little or no evidence that they are effective for treating colds and flu.	
NAME	PREGNANCY INFORMATION
Vitamin C	The usual recommended amount in pregnancy is 85 mg/day. Higher doses have not been studied in pregnancy.
Zinc	The usual recommended amount in pregnancy is 11 mg/day. Higher doses have not been studied in pregnancy.
Echinacea	The few available studies do not suggest that echinacea increases the chance of birth defects or pregnancy problems. However, echinacea products could contain unlisted ingredients, such as alcohol or lead.
Elderberry	Not studied for use in pregnancy, so there is no information about possible risks.
Propolis	Not studied for use in pregnancy, so there is no information about possible risks.
Homeopathic products (Zicam®, Boiron®, Hyland's®, others)	Not studied for use in pregnancy, so there is no information about possible risks.
Herbal teas	Many herbs have not been studied in pregnancy. Some herbs could increase pregnancy risks. Herbal teas that claim to treat or prevent illness are supplements and are not regulated by the FDA in the same way that teas sold as beverages are. Ask your healthcare provider or contact MotherToBaby for more information before using.

Fact sheets with more information about many of these medications and supplements can be found at mothertobaby.org. Over-the-counter products that contain only one medication are preferred over products that contain multiple medications you might not need. Nonmedication options that can help soothe cold and flu symptoms during pregnancy include saline nasal spray, nasal strips, shower tablets, drinking warm water with lemon and honey, gargling with salt water, using a clean humidifier, staying hydrated, and getting plenty of rest.



This chart was developed collaboratively by MotherToBaby and the Society for Maternal-Fetal Medicine (SMFM) and is supported by funding from the Centers for Disease Control and Prevention (CDC). This chart provides a general overview of common treatments for cold and flu symptoms during pregnancy. It is not a comprehensive list and should not replace medical advice from a healthcare provider.

This resource was supported by SMFM and the CDC of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$400,000 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

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