



Cystic Fibrosis Research News

Title:

Drugs during pregnancy and breast feeding in women diagnosed with Cystic Fibrosis – an update

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What was your

Our goal was to investigate the safety of prescription medication in women with Cystic Fibrosis (CF) during pregnancy and breastfeeding. This overview will assist clinicians in making therapeutic decisions for women who are pregnant and living with CF, providing recommendations regarding the safe use of prescription medication.

Why is this important?

Life expectancy of people with CF has improved during the past decades, as have the number of pregnancies. To insure the best outcomes for mother and baby, well-planned management of pregnancy becomes increasingly important, including knowledge of medication safety during pregnancy and breastfeeding. Medication can cross the placenta and/or is excreted into breast milk and can form a risk for the unborn child/breastfed infant. These concerns dictate that clinicians need to gather information about drug safety from multiple sources, to reliably understand the safety of various medications and the recommendations for use in CF.





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What did you do?

In 2008, Edenborough and colleagues published guidelines for the management of pregnancy in women living with CF. The recommendations addressed the safety of prescription medication during pregnancy and lactation. Our paper evaluated whether new safety information became available following this publication in 2008. As we became aware of new information, we updated our recommendations, including the impact and safety of CFTR modulators.

What did you find?

Although much research has been performed to evaluate the safety of drug use, knowledge about drug risks for pregnant or lactating women is still scarce. Pregnant and lactating women are usually excluded from studies evaluating the effectiveness and safety of drugs; which makes it very challenging to understand the most effective management of women during pregnancy and lactation. We hope that we have made a convenient and clear overview for clinicians with the most up-to-date recommendations addressing the safety and risks of prescription medication during pregnancy and breastfeeding.

What does this mean and reasons for caution?

The drug of choice should depend on therapeutic benefits for the mother versus the possible adverse effects for the fetus/infant. As mentioned earlier, this can be challenging due to the lack of studies addressing drug risks for pregnant or lactating women.

What's next?

A pressing need for careful observations combined with reporting of experience of drug use is needed in women with CF who are pregnant, especially in the era of novel CFTR modulators, whose effects on the unborn child have not yet been fully studied.

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