

به نام خدا



درمان دارویی در بارداری



دکتر طلعت محمدی

روانپزشک

دی 1400

طبقه بندی داروها در بارداری



گروه A و B (مجاز)

گروه C (با احتیاط - در صورت لزوم)

گروه D (غیر مجاز - مگر در شرایط ویژه با حداقل دوز و زمان)

گروه X (ممنوع)

Dr. Hale's Lactation Risk Categories

L1	Safest Drug which has been taken by a large number of breastfeeding mothers without any observed increase in adverse effects in the infant. Controlled studies in breastfeeding women fail to demonstrate a risk to the infant and the possibility of harm to the breastfeeding infant is remote; or the product is not orally bioavailable in an infant.
L2	Safer Drug which has been studied in a limited number of breastfeeding women without an increase in adverse effects in the infant; And/or, the evidence of a demonstrated risk which is likely to follow use of this medication in a breastfeeding woman is remote.
L3	Moderately Safe There are no controlled studies in breastfeeding women, however the risk of untoward effects to a breastfed infant is possible; or, controlled studies show only minimal non-threatening adverse effects. Drugs should be given only if the potential benefit justifies the potential risk to the infant.
L4	Possibly Hazardous There is positive evidence of risk to a breastfed infant or to breast-milk production, but the benefits of use in breastfeeding mothers may be acceptable despite the risk to the infant (e.g. if the drug is needed in a life-threatening situation or for a serious disease for which safer drugs cannot be used or are ineffective).
L5	Contraindicated Studies in breastfeeding mothers have demonstrated that there is significant and documented risk to the infant based on human experience, or it is a medication that has a high risk of causing significant damage to an infant. The risk of using the drug in breastfeeding women clearly outweighs any possible benefit from breastfeeding. The drug is contraindicated in women who are breastfeeding an infant.

SSRI



FLUOXETINE(PROZAC)	C-L3
CITALOPRAM	C-L3
ES-CITALOPRAM(EZIPAM)	C-L3
SERTRALIN(ZOLOFT)	C-L2
PAROXETINE(PAXIL)	D-L2
FLUVOXAMIN	C-L2

BENZODIAZEPINES



- ❧ CHLORDIAZEPOXIDE(D-L3)
- ❧ DIAZEPAM(D-L3)
- ❧ LORAZEPAM(D-L3)
- ❧ ALPRAZOLAM(D-L3)
- ❧ MIDAZOLAM(D-L3)
- ❧ OXAZEPAM(D-L3)
- ❧ Flunazepam-Estazolam-Quazepam(X)

TCA



❧ AMITRIPTYLINE	C-L2
❧ CLOMIPRAMINE	C-L2
❧ IMIPRAMINE	C-L2
❧ DOXEPINE	C-L5
❧ NORTRIPYLINE	C-L2
❧ MAPROTILINE	B-L3
❧ TRIMIPRAMINE	C-L2

ATYPICAL ANTIPSYCHOTICS

❧ ARIPIPRAZOL	C-L3
❧ OLANZAPINE	C-L2
❧ CLOZAPINE	B-L3
❧ RISPERIDONE	C-L3
❧ QUETIAPINE	C-L4
❧ ZIPRASIDON	C-L4

TYPICAL ANTIPSYCHOTICS

❧ HALOPRIDOL	C-L2
❧ PERPHENAZINE	C-(N/A)
❧ CHLORPROMAZINE	C-L3
❧ TRIFLUPRAZINE	C-(N/A)
❧ FLUPHENAZINE	C-L3
❧ THIOTHIXENE	C-L4
❧ PIMOZIDE	C-L4

VALPROATE



عوارض جنینی (عوارض لوله عصبی -تاخیر تکامل)

گروه D

L2

LITHIUM



Ebstein anomaly عارضه جنینی مهم

لزوم سونوگرافی در سه ماه اول

گروه D

L4

سایر داروها



CARBAMAZEPINE	D-L2
LAMOTIGINE	C-L3
BUSPIRONE	B-L3
BUPROPIONE	B-L3
MIRTAZAPINE	C-L3
NEFAZODONE	C-L4
TRAZODONE	C
VENLAFAXINE	C
DOLUXETINE	C
TOPIRAMATE	D
ZOLPIDEM	B-L3
PROPRANOLOL	C

ECT



مکانیسم عمل

اندىکاسیون کاربرد ECT

عوارض

سیاس از توجه شما

