

# Prenatal antidepressant use may up risk for gestational diabetes

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(HealthDay)—Taking certain antidepressants while pregnant can

increase the risk for developing gestational diabetes, according to a study recently published in *The BMJ*.

Maëlle Dandjinou, Ph.D., of the University of Montreal, and colleagues performed a nested study of data collected from all pregnancies and children within Quebec, Canada, from January 1998 through December 2015 using the Quebec Pregnancy Cohort, a Canadian provincial database. Antidepressant use was identified by women who filled prescriptions for [antidepressants](#) between the first day of their last menstrual period and the date on which they were diagnosed with [gestational diabetes](#). Cases of gestational diabetes were identified after week 20 of pregnancy, and these data were randomly matched to data from controls in a 1:10 ratio based on gestational age on the calendar date of gestational diabetes diagnosis and year of pregnancy.

Among 20,905 cases and 209,050 matched controls, the researchers found that 4.2 percent had exposure to antidepressants. Usage of antidepressants had an overall association with an [increased risk](#) for developing gestational diabetes (adjusted odds ratio [aOR], 1.19). Specifically, women with the highest risk were those who took the serotonin and norepinephrine reuptake inhibitor venlafaxine (aOR, 1.27) and the tricyclic antidepressant amitriptyline (aOR, 1.52).

"The treatment of depression during pregnancy is a major concern and is challenging because depression is prevalent before and during pregnancy, and untreated depression can lead to relapse during pregnancy and in the postpartum period," the authors write. "Hence, [adverse outcomes](#) associated with antidepressant use during [pregnancy](#), including gestational diabetes, should be weighed against the consequences of nonmedicated depression, especially for women with severe depression."

One author disclosed serving as a consultant for plaintiffs in litigations

involving antidepressants and birth defects

**More information:** [Abstract/Full Text](#)

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