OTC Medications Medications During Pregnancy

Use the lowest effective dose for the shortest duration needed. At some point during pregnancy, you may experience one or more of the illnesses or conditions listed below. Based on current available evidence, the following medications and remedies have not been shown to cause harm in pregnancy. There are no guarantees regarding medication safety in pregnancy, so avoid taking medication you do not need.

Nausea & Vomiting

- Vitamin B6 + doxylamine: Vitamin B6 (pyridoxine) 10–25 mg by mouth every 8 hours plus doxylamine 12.5 mg two to four times daily.
- Motion sickness relief bands (Sea-Bands).
- Ginger tea, lozenges, pops, or powdered ginger capsules 250 mg 3–4 times daily as needed; ginger ale made with real ginger.
- Lemon water or lemon drops; frequent small snacks; frequent small sips of water or other clear liquids.
- Call the office if you cannot keep fluids down, have severe nausea/vomiting, are urinating only a small amount, or your urine is dark, or you feel dizzy or faint when standing.

Upper Respiratory Infections

- Cough: Dextromethorphan (Robitussin) is preferred over guaifenesin (Mucinex), although both may be used as needed.
- Sinus/Nasal Congestion - try first: saline or hypertonic nasal rinse (Neti Pot), saline nasal spray, cool mist vaporizer, and intranasal corticosteroid such as budesonide or fluticasone.
- Pseudoephedrine (Sudafed) and phenylephrine (Sudafed PE): prefer avoiding, especially in the 1st trimester. If needed for severe congestion, use sparingly and only as needed in the 2nd and 3rd trimesters.
- Oxymetazoline (Afrin): avoid in the 1st trimester. For severe refractory congestion, use only sparingly for less than 3 days in the 2nd and 3rd trimesters.

Seasonal Allergies - Runny Nose, Watery Eyes & Sneezing

- Antihistamines: diphenhydramine (Benadryl), chlorpheniramine (Chlor-Trimeton), loratadine (Claritin), cetirizine (Zyrtec).
- Nasal steroid: fluticasone (Flonase).

Sore Throat

- Lozenges: benzocaine/menthol (Cepacol), phenol (Chloraseptic).
- Cough drops: menthol (Halls, Vicks, or lemon drops).

Headache, Pain & Fever

- Acetaminophen (Tylenol) 650–1000 mg every 6 hours as needed. Maximum 4000 mg in 24 hours. If you are not relieved, call our office. Many products contain acetaminophen; check labels and do not combine medications that contain it.
- DO NOT take ibuprofen (Advil, Motrin) during pregnancy.

Heartburn / Acid Reflux

- Try first: lifestyle/diet changes and calcium carbonate (Tums).
- If needed next: famotidine (Pepcid) 20 mg 1–2 times daily.

- Sodium-free antacids: aluminum hydroxide + magnesium trisilicate (Gaviscon), aluminum hydroxide + magnesium hydroxide (Maalox), aluminum hydroxide + magnesium hydroxide + simethicone (Mylanta, Gelusil).
- If symptoms persist: a proton pump inhibitor may be used, taken in the morning on an empty stomach. Options include lansoprazole (Prevacid) 15–30 mg daily or pantoprazole (Protonix) 20–40 mg daily.

Gas

- Simethicone (Mylicon 80, Mylanta Gas, Gas-X).

Constipation

- Start with fluids, a high-fiber diet, and fiber such as psyllium (Metamucil) or polycarbophil (FiberCon).
- Next options: polyethylene glycol (MiraLAX) or docusate sodium (Colace).
- For short-term refractory symptoms: stimulant laxatives such as senna; other listed options include Milk of Magnesia and Peri-Colace.
- AVOID castor oil.

Diarrhea

- Loperamide (Imodium).
- Eat stool-thickening foods such as applesauce, bananas, cheese, pasta, and rice.
- If not resolved in 24–36 hours, call the office.

Insect Bites & Rash

- Lotions: calamine, pramoxine (Caladryl), hydrocortisone 1% (use sparingly), Aveeno anti-itch lotion, or Aveeno oatmeal bath.
- Oral: diphenhydramine (Benadryl) 25–50 mg every 6–8 hours.
- If a rash is unusual or persists, call the office.

Hemorrhoids

- Phenylephrine (Preparation H), hydrocortisone (Anusol), witch hazel (Tucks Pads), wipes, ointments, or suppositories.

Yeast Infections

- Monistat (7-day) or Gyne-Lotrimin.

Sleep

- Try first: sleep hygiene, doxylamine (Unisom), diphenhydramine (Benadryl), or magnesium.
- Melatonin: not well studied in pregnancy, therefore not recommended.

Acne

- Benzoyl peroxide or salicylic acid.
- AVOID retinoids such as Retin-A.

Please follow package directions for all medications unless a specific dose is listed above. For additional medication information, visit MotherToBaby.org. If you seek care outside our clinic, please tell the clinician that you are pregnant.