

Management of asthma during pregnancy

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Long-acting beta-adrenergic agents — Clinical experience with inhalation of the long-acting, selective beta-2 adrenergic bronchodilators (LABAs) during pregnancy is less extensive than with the SABAs ([table 5](#)). [Salmeterol](#) is not expected to increase the risk of congenital anomalies, based on data from animal studies and limited human experience [[34](#)]. Animal studies are also reassuring for [formoterol](#), although data from human pregnancies are limited [[35,36](#)]. A retrospective database study showed that salmeterol and formoterol do not increase the risk of delivering low birth weight, small for gestational age, or preterm infants [[14,16](#)]. Given these findings, continuation of a LABA during pregnancy is reasonable if a LABA has been needed (in combination with an inhaled glucocorticoid) to achieve asthma control before pregnancy [[37,38](#)].