PREGNANCY — No trials have been performed to assess the safety or efficacy of antiviral drugs during pregnancy [44].

Animal studies have shown no evidence of adverse outcomes in the offspring of animals exposed to the neuraminidase inhibitors during pregnancy [45-47]. Among 61 women who took oseltamivir during pregnancy, one case of trisomy 21 and one case of anencephaly were reported in their infants, although neither case was thought to be causally linked to drug exposure [46]. Ten of the 61 pregnancies ended in abortion, six of which were therapeutic. Three pregnant women were exposed to zanamivir during clinical trials [45,47]. Of these, one ended in spontaneous abortion, one in elective termination, and one resulted in a healthy infant.

Amantadine and rimantadine appear to be teratogenic and embryotoxic in animals [48]. There are no adequate studies of e letal and cardiovascular abnormalities have be amantadine during the first trimester of p

61人 妊娠
1人 ダウン症
10人 流産
6人は治療のため

All four drugs have been assigned to FDA their effects in pregnant women and fetuses ha ould be used during pregnancy only if the perc c to the embryo or fetus [44].

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A study assessed the metabolism and transplacental transfer of oseltamivir in an ex vivo human placenta model [50]. Oseltamivir and its metabolite were only detected in the placentas in which extremely high doses of oseltamivir were administered (20 to 830-fold higher than therapeutic dosing), suggesting that fetal exposure would be minimal with usual dosing.