

# Allergy & Asthma Center

of Southern Oregon, PC

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## ALLERGIES, ASTHMA & PREGNANCY

- 1.) Asthma itself if poorly controlled is more of a risk to the fetus and to the mother than any current standard asthma medication. Therefore, in severe asthma the treatment is much the same as it would be in nonpregnant patients. Allergies also could generally be treated with antihistamines and nasal sprays below.
- 2.) The medicines recommended during pregnancy are generally similar medicines to those used by nonpregnant asthmatics.

No medicine is known to be totally safe in pregnancy, therefore, when possible all medicines should be used to the least extent that is needed, but keeps asthma stable.

- 3.) Labeled medication categories.

**Category B** – medications have been studied extensively and are thought to be safe.

- 1.) Terbutaline & Albuterol inhaler
- 2.) Intal (Cromolyn) inhaler
- 3.) Atrovent (Ipratropium) inhaler
- 4.) Inhaled Corticosteroids (Pulmicort Turbuhaler)
- 5.) Penicillin antibiotics (including Amoxicillin & Augmentin)
- 6.) Erythromycin antibiotics
- 7.) Cephalosporins (Ceftin, etc.)
- 8.) Antihistamines (Claritin, Zyrtec)

**Category NC** – (Non-Categorized) – these medicines have been used for years with no ill effects in pregnant women

- 1.) Beclovent
- 2.) Antihistamines (Benedryl)

**Category C** – There are no adequate studies in humans showing safety, however, the benefits may outweigh the risks.

- 1.) Prednisone
- 2.) Theophylline
- 3.) Inhaled Corticosteroids -- Pirbuterol (Maxair), Azmacort, Aerobid, & Flovent inhalers
- 4.) Beclomethasone *used as a nose inhaler.*
- 5.) Antihistamines (Zyrtec D, Claritin D, Allegra, Allegra D)
- 6.) Allergy Nose Sprays (Nasocort AQ, Rhinocort Aqua, Nasonex, Flonase)

These medicines are, therefore, most often the first recommended during pregnancy.

- 4.) Allergy shots are very effective in suppressing allergies or asthma. If allergy shots have been begun before pregnancy, they may be continued usually at a constant dose throughout pregnancy.

Allergy shots generally should not be started on patients who are known to be pregnant. Rather the shots should be held and begun after the pregnancy is completed.

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