

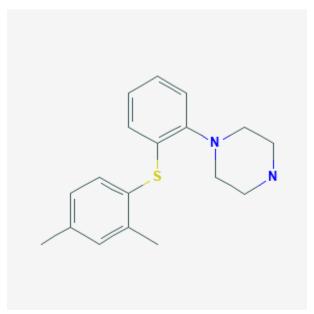
U.S. National Library of Medicine National Center for Biotechnology Information **NLM Citation:** Drugs and Lactation Database (LactMed) [Internet]. Bethesda (MD): National Library of Medicine (US); 2006-. Vortioxetine. [Updated 2018 Dec 3]. **Bookshelf URL:** https://www.ncbi.nlm.nih.gov/books/



# Vortioxetine

Revised: December 3, 2018.

CASRN: 508233-74-7



# **Drug Levels and Effects**

## Summary of Use during Lactation

Because there is no published experience with vortioxetine during breastfeeding, an alternate drug may be preferred, especially while nursing a newborn or preterm infant.

## **Drug Levels**

Maternal Levels. Relevant published information was not found as of the revision date.

Infant Levels. Relevant published information was not found as of the revision date.

## **Effects in Breastfed Infants**

Relevant published information was not found as of the revision date.

**Disclaimer:** Information presented in this database is not meant as a substitute for professional judgment. You should consult your healthcare provider for breastfeeding advice related to your particular situation. The U.S. government does not warrant or assume any liability or responsibility for the accuracy or completeness of the information on this Site .

## **Effects on Lactation and Breastmilk**

An observational study looked at outcomes of 2859 women who took an antidepressant during the 2 years prior to pregnancy. Compared to women who did not take an antidepressant during pregnancy, mothers who took an antidepressant during all 3 trimesters of pregnancy were 37% less likely to be breastfeeding upon hospital discharge. Mothers who took an antidepressant only during the third trimester were 75% less likely to be breastfeeding at discharge. Those who took an antidepressant only during the first and second trimesters did not have a reduced likelihood of breastfeeding at discharge.[1] The antidepressants used by the mothers were not specified.

A retrospective cohort study of hospital electronic medical records from 2001 to 2008 compared women who had been dispensed an antidepressant during late gestation (n = 575) to those who had a psychiatric illness but did not receive an antidepressant (n = 1552) and mothers who did not have a psychiatric diagnosis (n = 30,535). Women who received an antidepressant were 37% less likely to be breastfeeding at discharge than women without a psychiatric diagnosis, but no less likely to be breastfeeding than untreated mothers with a psychiatric diagnosis.[2] None of the mothers were taking vortioxetine.

## **Alternate Drugs to Consider**

#### Nortriptyline, Paroxetine, Sertraline

### References

- 1. Venkatesh KK, Castro VM, Perlis RH et al. Impact of antidepressant treatment during pregnancy on obstetric outcomes among women previously treated for depression: An observational cohort study. J Perinatol. 2017;37:1003-9. PubMed PMID: 28682318.
- 2. Leggett C, Costi L, Morrison JL et al. Antidepressant use in late gestation and breastfeeding rates at discharge from hospital. J Hum Lact. 2017;33:701-9. PubMed PMID: 28984528.

# **Substance Identification**

### **Substance Name**

Vortioxetine

## **CAS Registry Number**

508233-74-7

### **Drug Class**

Breast Feeding

Lactation

Antidepressive Agents

Serotonin Uptake Inhibitors

Serotonin 5-HT1 Receptor Agonists

Serotonin 5-HT1 Receptor Antagonists

Serotonin 5-HT3 Receptor Antagonists