Tuesday, March 1, 8:00AM-12:00PM Plenary Session

Teratogen Update

Moderator: Angela Lin, MassGeneral Hospital for Children, and the Massachusetts Birth Defects Monitoring Program, DPH, Boston, MA

Counseling and Prenatal Monitoring for Women with Known Teratogenic Exposures

Janice L.B. Byrne, University of Utah, Departments of Obstetrics & Gynecology and Pediatrics; Utah

Birth Defect Network, Salt Lake City, Utah

With the possible exception of poorly controlled maternal diabetes, teratogen exposure during pregnancy is relatively rare although the true incidence is difficult to ascertain. Overall, teratogens account for less than 1% of all birth defects according to Utah data. However, if only cases of birth defects with known causes are considered, about 2.3% are attributable to teratogens; of those, the majority, approximately 60%, is due to maternal diabetes. Clearly, preconceptional consultation in women with medication exposures due to chronic medical conditions would be the most beneficial, allowing for the adjustment of doses, discontinuing or changing to safer drug alternatives. However, as approximately half of all pregnancies are unplanned, intervention prior to the exposure is not always possible.

This talk will discuss both pre-and postconceptional considerations in teratogen counseling, including approaches to monitoring exposed pregnancies.