

PREGNANCY PLANNING For Women With Lupus

Recommendations based on the 2020 ACR Reproductive Health Guidelines*

#1

! Very active lupus

! Taking STOP List Medications

↑ RISK

pregnancy loss & premature birth or birth defects

! Taking GO List Medications

! Keeping lupus activity low (as possible)

↓ RISK

the SAFEST pregnancy possible for you

PREGNANCY COMPATIBLE ✓ GO LIST

- ✓ Hydroxychloroquine (HCQ, Plaquenil)
- ✓ Chloroquine
- ✓ Azathioprine (Imuran)
- ✓ Colchicine
- ✓ Cyclosporine (Neoral, Restasis) [monitor blood pressure]
- ✓ Tacrolimus (Prograf) [monitor blood pressure]
- ✓ Prednisone [use sparingly]

INSUFFICIENT INFORMATION △ CAUTION LIST

- △ Rituximab [only for very active disease]
- △ Belimumab [discontinue at conception]

MAY CAUSE BIRTH DEFECTS X STOP LIST**

- x Methotrexate
- x Mycophenolate (CellCept)
- x Mycophenolic acid (Myfortic)
- x Cyclophosphamide (Cytoxan) [for life/organ-threatening disease in 2nd or 3rd trimester]
- x Thalidomide (Thalomid)
- x Lenalidomide (Revlimid)
- x Leflunomide [doesn't cause loss or birth defects if stopped and removed with cholestyramine]

**If currently pregnant, STOP immediately. If planning pregnancy, talk with your doctor BEFORE you stop.

#2

IS YOUR LUPUS WELL CONTROLLED?

Work with your rheumatologist to answer these questions.

- Minimal signs of inflammation
- Minimal urine protein
- No flare requiring prednisone in last 6 months
- Check for Ro/SSA or antiphospholipid antibodies

#3

ARE YOUR MEDICATIONS RIGHT FOR PREGNANCY?

- Continue or start GO LIST medications
- HCQ recommended for all pregnancies
- Switch from STOP LIST meds to GO LIST meds
- If prednisone >5mg needed then add GO LIST med
- Start aspirin, 81 mg/day, at end of 1st trimester to lower preeclampsia risk
- Discuss any other medications with your obstetrician

#4

WHICH DOCTORS SHOULD YOU TALK WITH?

Ask your rheumatologist which doctors you need on board.

<ul style="list-style-type: none"> <input type="checkbox"/> Rheumatologist [see at least 1x per trimester] <input type="checkbox"/> Maternal-Fetal Medicine Specialist <input type="checkbox"/> Local Obstetrician (OB) 	<ul style="list-style-type: none"> <input type="checkbox"/> Nephrologist <input type="checkbox"/> Cardiologist <input type="checkbox"/> Pulmonologist <input type="checkbox"/> Hematologist <input type="checkbox"/> Dermatologist
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#5

DO YOU HAVE A PLAN FOR YOUR OTHER HEALTH ISSUES?

IF	THEN
Antiphospholipid Syndrome:	<input type="checkbox"/> Everyone: take 81mg aspirin daily <input type="checkbox"/> If you had a blood clot: therapeutic dose low molecular weight heparin (LMWH) <input type="checkbox"/> If you never had a blood clot: prophylactic dose LMWH
Ro/SSA antibodies:	<input type="checkbox"/> Hydroxychloroquine 400mg/day - cuts the risk for heart block in half <input type="checkbox"/> Consider fetal echocardiograms in the 2nd trimester
High blood pressure:	<input type="checkbox"/> Control carefully [NO ACE-inhibitors or Angiotensin Receptor Blockers]
Pain during pregnancy:	<input type="checkbox"/> Discuss pain medications, including NSAIDs, with your OB

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