

Marijuana Fact Sheet

What You Need to Know About Marijuana Use and Pregnancy

Marijuana use during pregnancy can be harmful to your baby's health. The chemicals in marijuana (in particular, tetrahydrocannabinol or THC) pass through your system to your baby and can harm your baby's development.¹⁻⁷

Although more research is needed to better understand how marijuana may affect you and your baby during pregnancy, it is recommended that pregnant women do not use marijuana.¹⁷

What are the potential health effects of using marijuana during my pregnancy?

- Some research shows that using marijuana while you are pregnant can cause health problems in newborns— including low birth weight.^{10,11}
- Breathing marijuana smoke can also be bad for you and your baby. Marijuana smoke has many of the same chemicals as tobacco smoke and may increase the chances for developmental problems in your baby.^{12,13}

Can using marijuana during my pregnancy negatively impact my baby after birth?

- Some research shows marijuana use during pregnancy may make it hard for your child to pay attention or to learn; these issues may only become noticeable as your child grows older.¹⁻⁷
- Separate from the direct, chemical effects of marijuana on a baby, use of marijuana may affect a mother's ability to be able to properly care for her baby.

Does using marijuana affect breastfeeding?

- Chemicals from marijuana can be passed to your baby through breast milk. THC is stored in fat and is slowly released over time, meaning your baby could still be exposed even after you stop using marijuana.
- However, data on the effects of marijuana exposure to your baby through breastfeeding are limited and conflicting. To limit potential risk to the infant, breastfeeding mothers should avoid marijuana use.^{11, 14-16}

Fast Facts

- Using marijuana during pregnancy may impact your baby's development.¹⁻⁷
- About 1 in 20 women in the United States reports using marijuana while pregnant.⁸



1 IN 20
use marijuana
while pregnant

- The chemicals in any form of marijuana may be bad for your baby – this includes eating or drinking, creams or lotions applied to skin, smoking, vaping and dabbing.⁹
- If you're using marijuana and are pregnant or are planning to become pregnant, talk to your doctor.



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For more information, visit:

- Smoking During Pregnancy: <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/tobaccousepregnancy/index.htm>
- Treating for Two: <https://www.cdc.gov/pregnancy/meds/treatingfortwo/index.html>

References

1. Mark, K, Desai A, and Terplan M. (2016). Marijuana use and pregnancy: prevalence, associated characteristics, and birth outcomes. *Arch Womens Ment Health*. 19(1): p. 105-11.
2. Fried, PA, Watkinson, B and Gray, R. (1998). Differential effects on cognitive functioning in 9- to 12-year olds prenatally exposed to cigarettes and marihuana. *Neurotoxicol Teratol*. 20(3): p. 293-306.
3. Leech, SL, et al. (1999). Prenatal substance exposure: effects on attention and impulsivity of 6-year-olds. *Neurotoxicol Teratol*. 21(2): p. 109-18.
4. Goldschmidt, L, et al. (2008). Prenatal marijuana exposure and intelligence test performance at age 6. *J Am Acad Child Adolesc Psychiatry*. 47(3): p. 254-63.
5. Campolongo P, et al. (2011). Developmental consequences of perinatal cannabis exposure: behavioral and neuroendocrine effects in adult rodents. *Psychopharmacology*. 214: p. 5-15.
6. Warner, TD, Roussos-Ross, D, and Behnke, M. (2014). It's not your mother's marijuana: effects on maternal-fetal health and the developing child. *Clin Perinatol*. 41(4): p. 877-94.
7. Colorado Department of Public Health and Environment. Monitoring Health Concerns Related to Marijuana in Colorado: 2014. (2015). Retrieved from <https://drive.google.com/file/d/0B0tmPQ67k3NVVUhScGZUSWpGG1k/viewExternal>
8. Substance Abuse and Mental Health Services Administration. (2017). Key substance use and mental health indicators in the United States: Results from the 2016 National Survey on Drug Use and Health. Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.
9. Berger, E. (2014). Legal marijuana and pediatric exposure pot edibles implicated in spike in child emergency department visits. *Ann Emerg Med*. 64(4): p. A19-21.
10. Conner SN, et al. (2016). Maternal marijuana use and adverse neonatal outcomes: A systematic review and meta-analysis. *Obstet Gynecol*. 128(4): p. 713-23.
11. Wang, GS, Roosevelt G, and Heard K. (2013). Pediatric marijuana exposures in a medical marijuana state. *JAMA Pediatr*. 167(7): p. 630-3.
12. Wu, TC, et al. (1998). Pulmonary hazards of smoking marijuana as compared with tobacco. (1998). *N Engl J Med*. 318 (6): p. 347-51.
13. Gunn JKL, Rosales CB, Center KE, et al. (2016). Prenatal exposure to cannabis and maternal and child health outcomes: a systematic review and meta-analysis. *BMJ Open*. 6:e009986.doi:10.1136/bmjopen-2015-009986.
14. Reece-Stremtan S, Marinelli KA., (2015). Guidelines for breastfeeding and substance use or substance use disorder, revised 2015. *ABM Clinical Protocol #21*. *Breastfeed Med*. 10(3): p. 135-41.
15. Perez-Reyes M, Wall ME. (1982). Presence of Δ^9 -tetrahydrocannabinol in human milk. *N Engl J Med* 307: p. 819-20.
16. Monte, AA, Zane RD, and Heard KJ. (2105). The implications of marijuana legalization in Colorado. *JAMA*. 313(3): p. 241-2.
17. American College of Obstetricians and Gynecologists. Marijuana Use During Pregnancy and Lactation. (2017). Retrieved from <https://www.acog.org/Clinical-Guidance-and-Publications/Committee-Opinions/Committee-on-Obstetric-Practice/Marijuana-Use-During-Pregnancy-and-LactationExternal>