MANAGING ADHD IN PREGNANCY:

A Decision-Making Guide on Medication Use | June 2026

BC WOMEN'S HOSPITAL+ HEALTH CENTRE
Provincial Health Services Authority

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This guide is designed to help individuals with ADHD who are pregnant or planning to become pregnant make informed decisions about their medication use. It offers information about the benefits and risks of taking ADHD medication during pregnancy, and is meant to empower you with the knowledge to make the best choice for your health and your baby's well-being.

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Understanding ADHD and Pregnancy

- **~3 out of 100** adult women and **~4 out of 100** gender-diverse adults assigned female at birth have ADHD. ADHD is a condition that makes it harder to focus, control impulses, and affects activity levels. Many people with ADHD need ongoing treatment like medication or therapy to manage their symptoms.
- Pregnancy can be a time of significant physical, emotional, and mental changes, which may amplify ADHD symptoms such as difficulty focusing, staying organized, and managing daily tasks.
- Pregnancy is also a time of increased responsibilities and increased need for organization.

  EX: It may become challenging to manage medical appointments, take daily prenatal vitamins, or you may find yourself hyper fixating on finding the best crib, or the ideal birthing plan.

Untreated ADHD during pregnancy

Overall: Untreated ADHD may lead to poor mental health, which is a risk factor for low birth weight and preterm birth. It is a good idea to consider different options to support your well-being and manage ADHD symptoms during pregnancy.

Strategies to consider

Pregnancy can bring unique challenges for ADHD management, and even familiar strategies may need to be adapted to fit this stage of life. Here are some approaches to consider or revisit during this time.

	Establishing routines, structures, and habits.
	Self-care, including taking breaks, sleep hygiene, regular nutritious meals, and exercise.
	Taking public transport or making alternative transportation arrangements if you anticipate that changing/stopping your medication may make driving more challenging
	If you are driving, consider ways to make it safer: practice active scanning, cut down on distractions, and plan trips ahead of time.
	Using calendars, lists, and timers.
	Reducing workload during pregnancy, implementing additional structure, external supports, and workplace accommodations
	If you are thinking about changing or stopping your ADHD medication, talk to your doctor first

What do I already do?

What are some things I would like to try?

Treatment and management — psychotherapy

Cognitive Behavioural Therapy (CBT) —

Involves efforts to change thinking patterns. This may include:

- Recognizing and rethinking negative thoughts.
- Understanding others' behaviour.
- Building problem-solving skills.
- Boosting confidence in your abilities.

Dialectical behaviour therapy (DBT) —

Helps individuals build skills in four key areas:

- Mindfulness.
- Distress tolerance.
- Emotion regulation.
- Interpersonal effectiveness.

ADHD medication use during pregnancy

Overall: ADHD medications (both stimulants and non-stimulants) do not seem to be associated with major birth differences, including differences in how baby's heart is formed, or other serious problems with pregnancy or a child's growth and development.

See Scoten et al. 2026 in the references section for more detailed information

ADHD Medications

Stimulants	Non-stimulants
Amphetamine mixed salts (Adderall XR)	Atomoxetine (Strattera)
Dextroamphetamine (Dexedrine)	Bupropion (Wellbutrin)[1]
Lisdexamfetamine (Vyvanse)	Clonidine[2]
Methylphenidate (Ritalin, Ritalin SR, Biphentin, Concerta, Foquest)	Guanfacine (Intuniv XR)[3]

NOTE: If you are thinking about changing or stopping your ADHD medication, talk to your doctor first. Stopping medications suddenly after long-term use can cause withdrawal symptoms. Further, stopping these medications while pregnant can lead to higher stress or depression, more challenges with family life, and increased impulsive or risky behaviours.

1. Health Canada approval for this medication is not for the treatment of ADHD. It is sometimes prescribed "off label" for the treatment of ADHD.
2. Ibid.
3. Health Canada approval for this medication is for the treatment of ADHD amongst those aged 6 - 17 years old. It is sometimes prescribed "off label" for those 18 years and older.

Do I need to remain on medication?

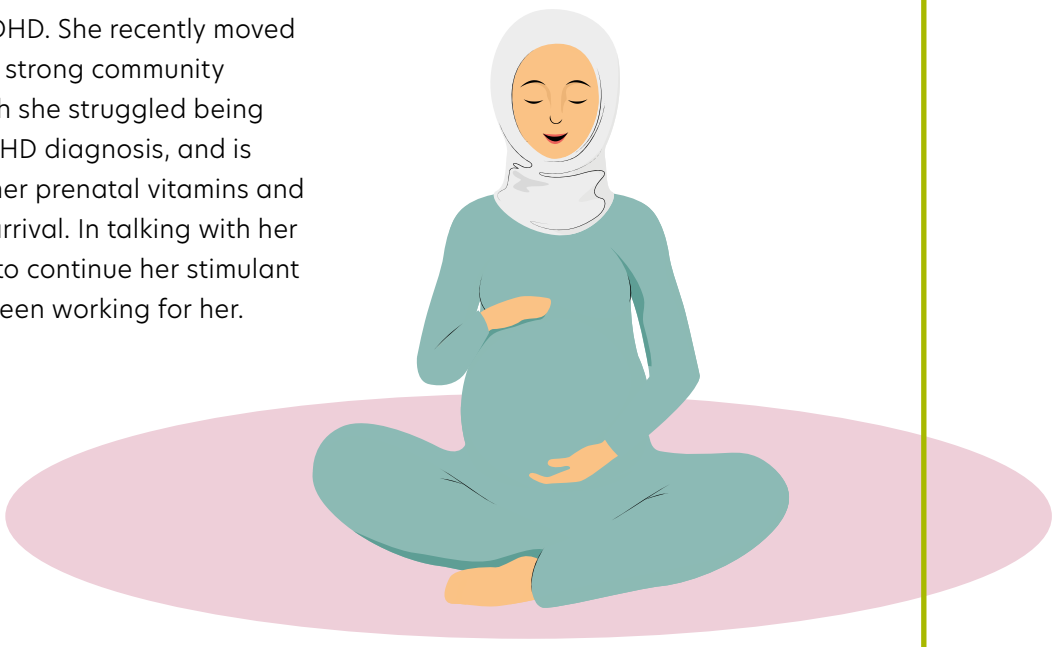
	How have you functioned in the past at work (or school) without the use of medications?
	How is your driving when not treated with medications for ADHD? Have you had a history of accidents? Do you have alternate means for transportation?
	When you haven't taken medication for ADHD, have you forgotten to turn off the stove or oven? Have you had a fire in the kitchen?
	How have your relationships with family and friends been affected when you haven't taken medication for ADHD compared to when you have?
	Do you think you would be able to manage daily tasks such as caring for yourself and your family and keeping up with appointments, and keeping organized without medication?
	Are there other strategies that have helped you manage ADHD symptoms in the past?

Whichever choice you make is the right choice

Feeling overwhelmed is common. You make the best decisions you can with the information you have at the time, considering the unique circumstances and emotional factors surrounding your pregnancy.

Finding the right balance – what works best for you?

Sami (she/her) is pregnant with ADHD. She recently moved to a new area and doesn't have a strong community yet. She also remembers how much she struggled being organized in school before her ADHD diagnosis, and is worried about forgetting to take her prenatal vitamins and getting organized for the baby's arrival. In talking with her health care provider, she decides to continue her stimulant medication at the dose that has been working for her.



Jane (they/them) is pregnant with ADHD. Their mom is coming to town to help prepare for the baby, they have been able to reduce their responsibilities at work, and they were managing decently well before going on medication. After talking to their doctor, they decide to try going off their stimulants.

What Matters to me?

Here is a space for you to jot down your thoughts, questions, or concerns and start creating an action plan.

Resources

In this section, we've included a variety of resources that can help you connect with others. These resources are designed to provide emotional support, practical advice, and a safe space for open conversation.

- https://www.postpartum.net/group/adhd-support/
- https://www.vancouveradhdcoaching.com/
- https://www.adhdpregnancy.ca/
- https://www.ndbirth.com/
- Your local crisis line: In BC: https://bc.cmha.ca/mental-health/find-help/

You may find it helpful to print this resource single-sided to allow extra space for writing notes on the back of each page if needed.

References

1. Scoten O, Schulz S, Ryan D, Shulman B, Paquette V, Carrion P, Tabi K, PSBC Clinical Reference Group, Hippman C. (2026) *BC Women's Provincial Reproductive Mental Health Program & Perinatal Services BC Best Practice Guidelines for Mental Health Disorders in the Perinatal Period: Attention-Deficit/Hyperactivity Disorder.* Vancouver, BC: BC Women's Provincial Reproductive Mental Health Program.
2. https://mothertobaby.org/baby-blog/addadhd-focusing-on-whats-best-for-mom-and-baby-during-pregnancy/
3. https://www.healthypregnancyhub.ca/fiche-informative/attention-deficit-hyperactivity-disorder-adhd/
4. https://womensmentalhealth.org/posts/adhd-pregnancy/

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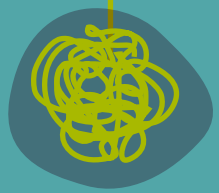

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