

September 2021

Pregnancy and Drug Use*

Carefully constructed, unbiased scientific research has not found that prenatal exposure to any criminalized drugs cause specific or unique harms. While there are numerous studies reporting findings that certain substances may increase a particular risk of harm, such as [lower birth weight], research has not found that any criminalized substances are abortifacients, cause miscarriages or stillbirths, or cause specific harms or impairments to the children prenatally exposed. In general, the risks associated with prenatal exposures to any of the criminalized drugs have been found to be comparable to or less than those associated with legal substances much more commonly used. Some newborns prenatally exposed to opioids, legal and illegal, may experience treatable and transitory withdrawal symptoms. These babies do not develop any differently from other children.

In addition, the U.S. Department of Justice has clarified that testing positive for a substance is not the same as having been harmed or even affected by that substance, explaining that “[d]rug tests detect drug use but not impairment. A positive test result, even when confirmed, only indicates that a particular substance is present in the test subject’s body tissue. It does not indicate abuse or addiction; recency; frequency, or amount of use; or impairment.”¹

**While no research confirms the safety of most drugs, legal and illegal, used by pregnant people, research does not support widely held, unscientific beliefs about the relative risks of harm from prenatal exposure to criminalized, controlled substances.*

Key Research Includes:

Deborah A. Frank et al., [Growth, Development, and Behavior in Early Childhood Following Prenatal Cocaine Exposure: A Systematic Review](#), Journal of the American Medical Association (2001).

Mishka Terplan et al., [The Effects of Cocaine and Amphetamine Use During Pregnancy on the Newborn: Myth versus Reality](#), Journal of Addictive Diseases (2011).

Tricia Wright et al., [Methamphetamines and Pregnancy Outcomes](#), Journal of Addiction Medicine (2015).

Walter K. Kraft & John N. van den Anker, [Pharmacologic Management of the Opioid Neonatal Abstinence Syndrome](#), Pediatric Clinics North America, (Oct. 2012).

Matthew R. Grossman et al., [An Initiative to Improve the Quality of Care of Infants With Neonatal Abstinence Syndrome](#), Pediatrics (May 2017).

Ciara A. Torres et al., [Totality of the Evidence Suggests Prenatal Cannabis Exposure Does Not Lead to Cognitive Impairments: A Systematic and Critical Review](#), Frontiers in Psychology (2020).

P. A. Fried & A. M. Smith, [A Literature Review of the Consequences of Prenatal Marijuana Exposure: An Emerging Theme of Deficiency in Aspects of Executive Function](#), Neurotoxicology and Teratology (2001).

¹ U.S. Dept. of Justice, *Drugs, Crime, and the Justice System: A National Report from the Bureau of Justice Statistics* 119 (1992).