

## PREGNANCY OUTCOME FOLLOWING EXPOSURE TO ERGOTAMINE TARTRATE COMBINATIONS: PRELIMINARY RESULTS OF 26 CASES

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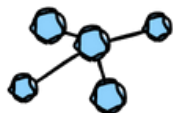
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Ergotamine tartrate was among the first ergot alkaloids to be identified and prescribed to treat migraine.



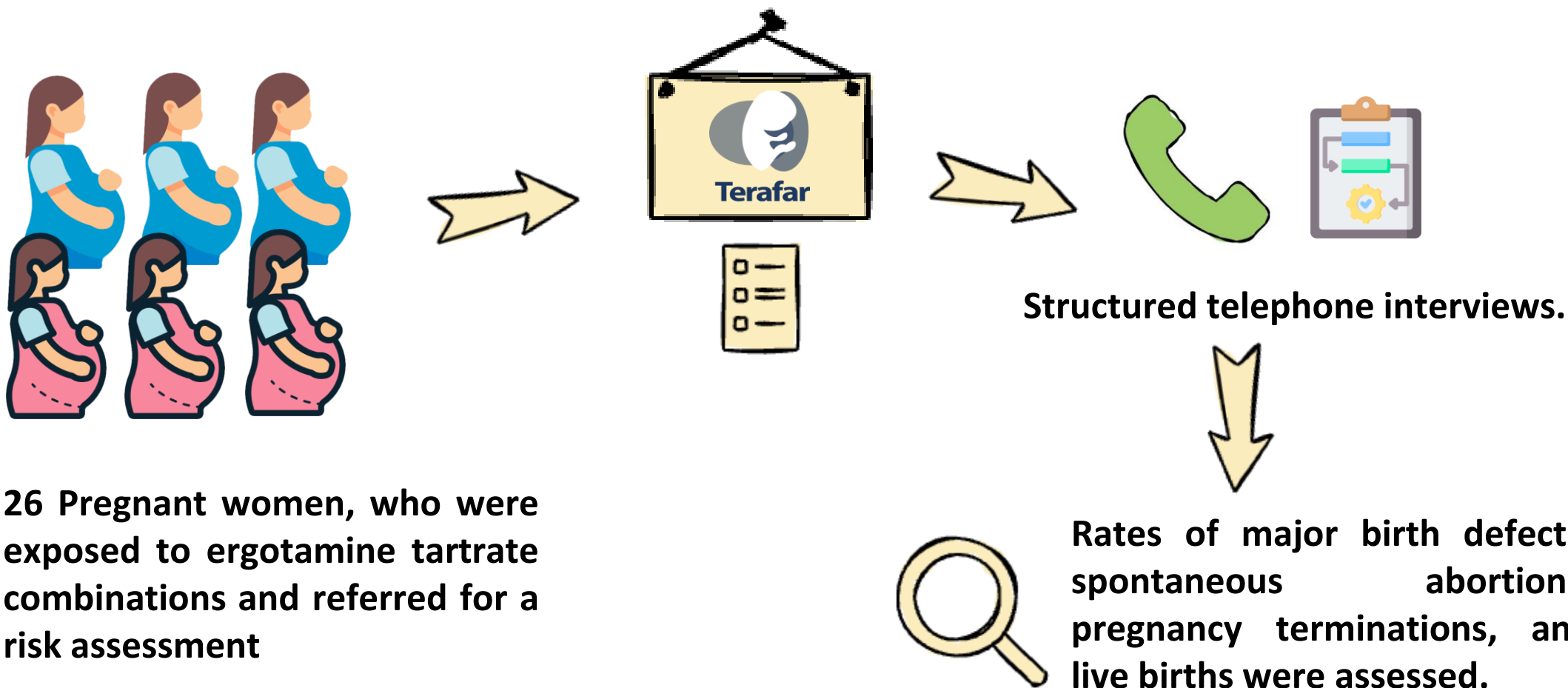
Ergotamines is contraindicated in pregnancy due to their vasoconstrictor and uterine contraction properties



But... what happens if women are exposed in the beginning of pregnancy?

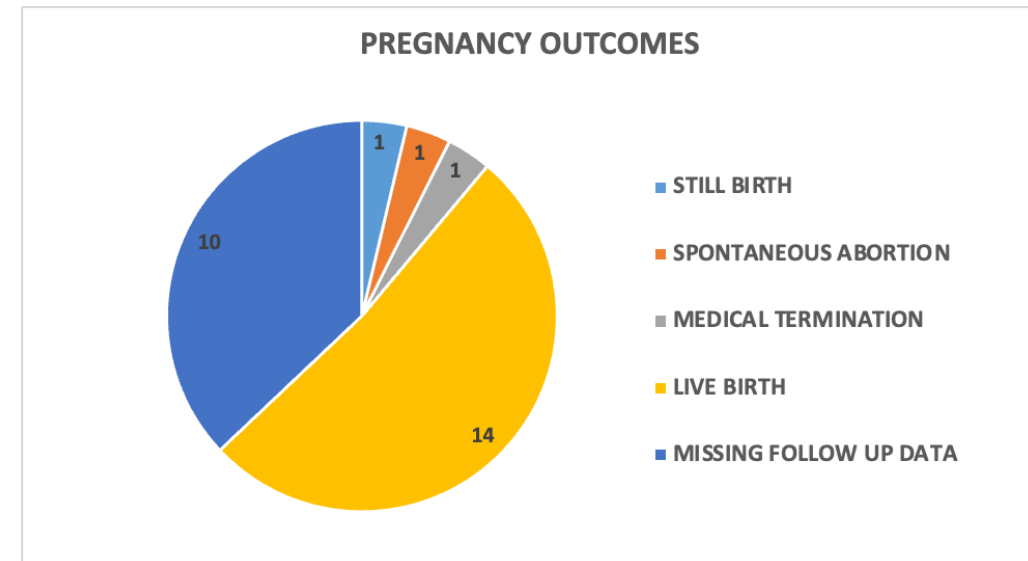
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**Aim: To evaluate pregnancy outcomes in 26 exposed women (Terafar, Izmir Katip Celebi University)**



**TABLE 1** Maternal characteristics  
at the time of consultation (n =26)

Maternal Age mean (Sd)	31.9(5.9)
Classification of age n (%)	
≤34 years	17(65,4)
≥35 years	9(34,6)
Folic acid supplementaion n(%)	9(34,6)
Alcohol consumption n(%)	1(3,8)
Smoke consumotion n(%)	8(30,8)
Radiation exposure, n(%)	2(7,7)
Daily ergotamine exposure (mg), n(%)	0,75(92,3)
Chronic disease without migraine n(%)	11(42,3)
Underlying disease n(%)	
Migraine	26(100)
Depression	3(11,1)
Asthma	1(3,8)
Thalassemai	1(3,8)
Diabetes	1(3,8)
Thryoid disease	3(11,1)
Fmf	1(3,8)
Gastritis	1(3,8)



Of the 16 pregnancy with known outcomes (including one twin pregnancy), 14 resulted in live births, one was spontaneous abortion, one was a stillbirth (in the twin pregnancy), and one was electively medical terminated.



## Conclusions:

This case series did not identify major congenital malformations following exposure to ergotamine tartrate combinations with mecloxamine, paracetamol, and caffeine.

While causality cannot be confirmed, placental insufficiency remains a plausible contributor to the stillbirth observed in this twin pregnancy.

Limitations!  
Small study, no  
control group

Larger  
studies  
are needed

