Pregnancy Outcomes After Second-Generation Antipsychotic Exposure: Extracting More Information From the Data

To the Editor: With great interest, we read the recent JCP article “Pregnancy Outcomes With Exposure to Second-Generation Antipsychotics During the First Trimester,” by Yakuwa and colleagues. Controversy regarding congenital malformation with the increased use of second-generation antipsychotics (SGAs) in pregnancy warrants reproductive safety data. We commend the authors for this extraordinary work.

We want to bring to readers’ attention some confounding factors that we think can further enlighten them. A family history of birth defects is a known risk factor for congenital malformations. There was no mention of any congenital disabilities in either of the groups in this study. Chromosomal abnormalities can cause malformations in both groups. With genetic testing and close medical attention and intervention, the rate of malformations can be minimal. The cause of spontaneous abortions, which occurred in 8.4% of pregnancies in the SGA group and 7.2% of pregnancies in the comparison group, is unknown. This might have missed any underlying malformations that would affect the results. Maternal education and educational intervention programs impact the occurrence of congenital malformations. Maternal stress, micronutrient deficiencies, and nutrient restrictions affect the structural brain and development of the offspring.

The study collected data retrospectively through a questionnaire, and we cannot rule out reporting bias. We believe that data collected multiple times throughout the pregnancy by telephone and by reviewing medical records can provide more in-depth details about the use of psychotropics. Multiple data point collection may help gather details about any missing information that could have affected the analysis. We are also interested in understanding the reasons/rationale behind excluding twins or triplets from the analysis, as there have been studies that included these sets in their analyses.

REFERENCES