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Several leading medical journal have published studies about the risk of birth defects associated with taking antidepressant such as Zoloft during pregnancy. The information in these studies prompted the Food and Drug Administration to upgrade Zoloft to its Pregnancy Category D—meaning that there is scientific evidence that the drug can cause birth defects.

In 2006, a study published in the *New England Journal of Medicine* (NEJM) found that pregnant women who use Zoloft or similar antidepressants after the 20th week of pregnancy were three times more likely to give birth to a child with persistent pulmonary hypertension of the newborn (PPHN) than women who did not use antidepressants. Compared to women who took antidepressants before the third trimester, Zoloft users were five times more likely to give birth to a child with PPHN.

The results of this study were corroborated by a 2012 study published in the *British Medical Journal* (BMJ). In the second study, researchers also determined that patients taking Zoloft or similar drugs during the third trimester were more likely to give birth to a child with PPHN.

Another NEJM study published in 2007 found that Zoloft could also increase the risk of birth defects when taken during the first trimester of pregnancy. Researchers found that women taking Zoloft during the first weeks of pregnancy were twice as likely as non-antidepressant users to give birth to a child with certain heart defects, including ventricular outflow tract obstruction defects, hypoplastic left heart syndrome, ventricular septal defects or atrial septal defects.

If you or a loved one took Zoloft during pregnancy and gave birth to a baby with heart defects or other birth defects, you may qualified to file a lawsuit. For a free legal consultation, contact the law firm of Hissey Kientz, LLP by calling toll-free at 1-866-275-4454, or by filling out the free case evaluation form located on this page.