PHILADELPHIA — Sumatriptan and naratriptan do not appear to significantly raise the risk of major congenital malformations in fetuses that are exposed to the drugs in utero, according to the latest analysis of an international pregnancy registry.

Established in 1996, the GlaxoSmithKline registry has accumulated data on 849 pregnancies exposed to the drugs. Birth defects occurred in 4.5% of women who were exposed to sumatriptan after conception, compared with 2.7% of women who were exposed to naratriptan. There were five spontaneous losses, and 11 induced abortions.

The malformations that occurred in infants who were exposed to sumatriptan in the first trimester included abnormal head circumference, single palmar crease, and systolic murmur; moderate craniosynostosis; cerebral abnormality with developmental delay; partial cleft lip; ventricular septal defects; biliary atresia; diaphragmatic hernia; pyloric stenosis; anterior displacement of anus; hip dysplasia; polydactyly; malformation of left hand; and Down syndrome.

No data were available for the three birth defects that occurred in infants who were exposed to sumatriptan after the first trimester. Among fetuses exposed to naratriptan, there were five spontaneous losses, one induced abortion, and one live infant with a 2.5-mm ventricular septal defect that was expected to close spontaneously.

The pregnancy registry did not contain any data on the exposure to the combination of sumatriptan and naproxen. The full report was published online in Headache (doi: 10.1111/j.1526-4610.2009.01329.x).