

香港婦產科學院

THE HONG KONG COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS



A Foundation College of Hong Kong Academy of Medicine
(Incorporated in Hong Kong with limited liability)

Paracetamol use in pregnancy - the current stand of The Hong Kong College of Obstetricians and Gynaecologists (HKCOG) (issued on 26th September 2025)

In response to the United States Food and Drug Administration's (FDA) recent warning regarding the association of paracetamol / acetaminophen (name in USA) and neurological development disorders (NDS), including autism spectrum disorders (ASD) and attention deficit hyperactivity disorders (ADHD) of the children (1), our college has reviewed the latest medical literature and the most recent statements from various international and local medical authorities, including the American College of Obstetricians and Gynaecologists (ACOG) (2), the Australian and New Zealand College of Obstetricians and Gynaecologists (ANZOG) (3), Royal College of Obstetricians and Gynaecologists (RCOG) (4), Therapeutic Goods Administration (TGA) in Australia (5) and Department of Health, Hong Kong (6). Our key conclusions are:

- No Proven Causation: The College is in the opinion that a causative link between paracetamol use in pregnancy and NDS (like ASD and ADHD) in children has <u>not</u> been established. While some studies indicate a potential association, other high-quality studies found a negative correlation.
- 2. **Paracetamol is Still Considered Safe:** The College reaffirms that paracetamol remains a **safe, effective, and recommended** treatment for fever and pain during pregnancy. The risks of *not treating* these conditions pose harm to the unborn fetus from high fever or negative impacts on maternal wellbeing from uncontrolled pain.
- 3. **Guidance for Prudent Use:** As with all medications in pregnancy, paracetamol should be used judiciously. This means:
 - a. It should be taken only when clinically necessary.
 - b. It should be used at the <u>lowest effective dose</u> for the <u>shortest duration</u> needed.
- 4. Comparison with Other Pain Relievers (NSAIDs): The common alternative, NSAIDs (e.g. ibuprofen, naproxen), is generally **not recommended** during pregnancy, especially after 20 weeks. The exception is <u>low-dose aspirin</u> (≤160mg daily), which is considered <u>safe</u> when prescribed for specific obstetric conditions, such as pre-eclampsia prophylaxis and anti-phospholipid syndrome.



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In essence, the HKCOG's current stand is that the benefits of using paracetamol for indicated conditions during pregnancy continue to <u>outweigh</u> any unproven risks. The College will continue to monitor new research and update our guidance when needed.

References:

- (1) United States Food and Drug Administration's (FDA) https://www.fda.gov/news-events/press-announcements/fda-responds-evidence-possible-association-between-autism-and-acetaminophen-use-during-pregnancy
- (2) American College of Obstetricians and Gynaecologists https://www.acog.org/news/news-releases/2025/09/acog-affirms-safety-benefits-a cetaminophen-pregnancy
- (3) Royal Australian and New Zealand College of Obstetricians and Gynaecologists https://ranzcog.edu.au/news/paracetamol-use-in-pregnancy/
- (4) Royal College of Obstetricians and Gynaecologists https://www.rcog.org.uk/news/the-royal-college-of-obstetricians-and-gynaecologi sts-issues-advice-for-pregnant-women-and-people-on-the-use-of-paracetamol-to-manage-fever-and-pain/?utm_source=Royal%20College%20of%20Obstetricians %20and%20Gynaecologists&utm_medium=email&utm_campaign=15181317_W eekly%20member%20email%20%7C%20INT%20F%26M%20%7C%20240925 &utm_content=Paracetamol%20advice&dm_i=15N0,91DZ9,RJDRSE,11RUZC,1
- (5) Therapeutic Goods Administration (TGA) in Australia https://www.tga.gov.au/news/media-releases/paracetamol-use-pregnancy
- (6) Drug Office, Department of Health, HKSAR https://www.drugoffice.gov.hk/eps/upload/eps_news/56173/EN/1/Paracetamol.pdf