

Cannabis Use and Pregnancy

Fact sheet for healthcare providers



There is no known safe amount or form of cannabis use while pregnant or nursing.

Evidence indicates prenatal cannabis exposure is associated with adverse pregnancy outcomes, including low birth weight and preterm birth. Although long-term outcomes are not fully understood, emerging research suggests

possible effects on child neurodevelopment, behaviour, and mental health. Until more evidence is available, avoidance is the safest recommendation.

Health care providers can help people make informed decisions about cannabis use by sharing clear information on the risks and having supportive, non-judgmental conversations.

Factors to consider in cannabis use

Most individuals who are trying to get pregnant, find out they are pregnant, or are breast/chest feeding stop or reduce cannabis use. However, there are a variety of reasons some pregnant individuals from all socioeconomic and ethnic backgrounds may find it difficult.

- They have lived experience with violence, trauma, health challenges or substance use.
- Stigma makes it difficult for them to ask for and access support from health care providers or friends and family.
- Cannabis has become readily available and use has been normalized since legalization.
- They do not have a support network or environment that supports non-use.

Potential health impacts of cannabis use

While trying to get pregnant

Cannabis use may:

- Reduce fertility in both partners
- Reduce sperm count and motility
- Disrupt ovulation, implantation, and menstrual cycles
- Reduce success of assisted reproductive technologies

During pregnancy

For individuals who are pregnant, cannabis use may:

- Cause dizziness, anxiety, confusion, impaired coordination, and fatigue
- Lead to decreased blood pressure and increased fall risk
- Expose them to harmful chemicals when smoked
- Pose higher risks when combined with tobacco, nicotine or alcohol

THC can cross the placenta and reach the fetus, which can lead to:

- Increased risk of low birth weight and preterm birth
- Possible effects on fetal brain development
- Potential longer-term impacts on attention, learning, memory, and behaviour
- Possible associations with later mental health concerns

While breast/chest feeding

THC or CBD may accumulate in breast tissue. It may persist in the body for weeks after stopping use and can pass into breast milk. In infants, this can lead to:

- Drowsiness, reduced muscle tone, and poor suckling
- Possible impacts on feeding and growth
- Long-term neurodevelopmental effects, though this remains uncertain

Clinical guidance on cannabis use

- Discuss risks and counsel that the safest option is no cannabis use.
- Emphasize that it's never too late to make a change, and stopping or reducing use at any time can reduce the potential impacts.
- If abstinence is difficult, support reduction and offer referral to supports.
- If used for medical reasons, weigh the benefits of use against the potential risks to the individual and the fetus, and explore evidence-based alternatives, if available.
- If used as a means for managing nausea or other symptoms, discuss risks and explore safer alternatives.



How to talk to patients about cannabis use

Normalize and support disclosure

- Ask about substance use routinely
- Reassure patients that conversations are judgement-free
- Acknowledge concerns about stigma or repercussions

Use a harm reduction approach

- Recognize that stopping use may not be immediately achievable
- Support reduction when stopping is not possible
- Discuss frequency and method of use, potency, and combined use with alcohol or tobacco
- Be mindful of language and focus on the substance instead of the individual's behaviour, for example, "If a baby is exposed to cannabis," instead of, "If you use cannabis."

Respect autonomy and context

- Provide clear, balanced information on risks and options
- Avoid assumptions about motivation or intent
- Consider factors such as mental health, stress, trauma, and socioeconomic impacts

Emphasize seeking and accepting support

- Reinforce that it's never too late to reduce or stop use
- Encourage their partner and/or support network to help achieve non-use or reduction goals
- Connect patients with available community resources



For more information, resources and support, patients and health care providers can visit:

KnowMyLimits.ca