

## Autism risk from antipsychotics during pregnancy misreported, hyped by media

**The GLP aggregated and excerpted this blog/article to reflect the diversity of news, opinion and analysis.**

The alarm has been sounded: Antidepressants cause autism! Or so one could easily think based on [a new study in JAMA Pediatrics](#). Four researchers in Quebec conclude that “the use of antidepressants, specifically selective serotonin reuptake inhibitors [SSRIs], during the second and/or third trimester increases the risk of [autism spectrum disorder] in children.” In a ResearchGate interview, study senior author and perinatal pharmacoepidemiologist Anick Bérard of the Université de Montréal and the CHU Sainte-Justine Research Centre firmly advocated avoiding antidepressant use during pregnancy: “Depression needs to be treated during pregnancy but with something other than antidepressants in the majority of cases. The risk/benefit ratio is clearly leaning towards no use.”

If true, this could be a discovery with implications for the much-debated “autism epidemic” and require serious reconsideration of depression treatment for pregnant women. Has a missing link been found?

Study co-author Bérard, it turns out, has been criticized by a federal judge for [cherry-picking results to link antidepressants to birth defects](#). The press should treat such studies with skepticism rather than leading with their findings. Sober pieces in [Science](#), [Wired](#), and [NPR](#) rightly questioned whether the study was significant and whether Bérard’s advocacy for stopping antidepressant usage during pregnancy was justified. In particular, Emily Underwood in *Science* wisely led off by writing “[Many epidemiologists and psychiatrists say the study, published today in JAMA Pediatrics, is flawed and will cause unnecessary panic.](#)”

**Read full, original post:** [Another Misguided Panic About Autism](#)