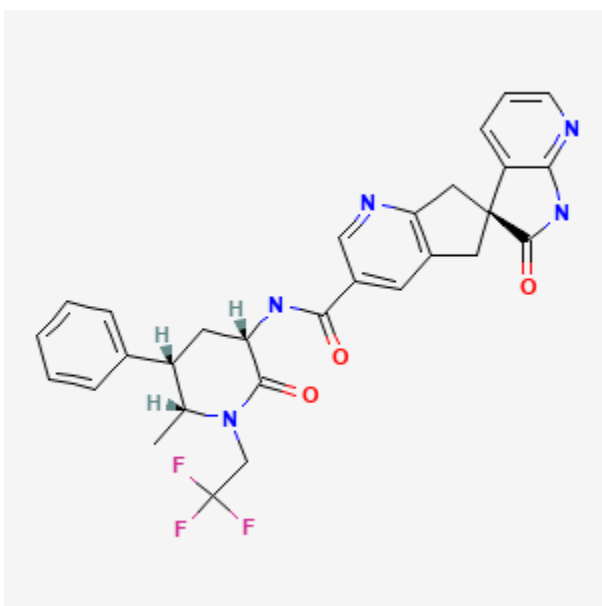




Ubrogепant

Revised: December 15, 2025.

CASRN: 1374248-77-7



Drug Levels and Effects

Summary of Use during Lactation

No information is available on the clinical use of ubrogепant during breastfeeding. However, amounts in breastmilk are low and virtually absent from milk 16 hours after a dose. Ubrogепant is not expected to cause any adverse effects in breastfed infants. If ubrogепant is required by the mother of an older infant, it is not a reason to discontinue breastfeeding, but until more data become available, an alternate drug may be preferred while nursing a newborn or preterm infant. Some experts recommend withholding breastfeeding for 8 to 12 hours after a dose.[1]

Disclaimer: Information presented in this database is not meant as a substitute for professional judgment. You should consult your healthcare provider for breastfeeding advice related to your particular situation. The U.S. government does not warrant or assume any liability or responsibility for the accuracy or completeness of the information on this Site.

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Drug Levels

Maternal Levels. Twelve lactating women who were 1 to 6 months postpartum received a single dose of 100 mg of ubrogepant orally. Breastmilk was expressed completely from both breasts using an electric pump and collected at 0 to 2, 2 to 4, 4 to 8, 8 to 12, 12 to 16, and 16 to 24 hours after the dose. The peak concentration in milk was 384 mcg/L in the 0 to 2 hour sample, which was designated as 1 hour. The concentrations of ubrogepant in breast milk were <1 mcg/L in the collection at 16 to 24 hours after the dose in 10 of the 12 participants. The cumulative amount of ubrogepant recovered in breast milk over 24 hour after the dose was 0.014 mg and the mean relative infant dose was 0.15%.[2]

Infant Levels. Relevant published information was not found as of the revision date.

Effects in Breastfed Infants

Relevant published information was not found as of the revision date.

Effects on Lactation and Breastmilk

Relevant published information was not found as of the revision date.

Alternate Drugs to Consider

(Migraine Prophylaxis) [Divalproex](#), [Erenumab](#), [Metoprolol](#), [Nortriptyline](#), [Propranolol](#), [Topiramate](#), [Valproic Acid](#); (Migraine Treatment) [Eletriptan](#), [Rizatriptan](#), [Sumatriptan](#), [Zolmitriptan](#)

References

1. Ornello R, Maassen van den Brink A, Puledda F, et al. Migraine management during pregnancy, breastfeeding and in women planning pregnancy. *Cephalalgia* 2025;45:3331024251393945. PubMed PMID: 41263702.
2. Boinpally RR, Smith JH, Cohen E, et al. Milk and plasma pharmacokinetics of single-dose ubrogepant in healthy lactating women. *Headache* 2025;65:1190–7. PubMed PMID: 40391560.

Substance Identification

Substance Name

Ubrogepant

CAS Registry Number

1374248-77-7

Drug Class

Breast Feeding

Lactation

Milk, Human

Analgesics

Calcitonin Gene Related Peptide Receptor Antagonists

CGRP-R Inhibitors