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Report on Teratogenic Agent and Drugs used in Pregnancy

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Abstract: *The physiology of pregnancy influences the pharmacokinetics of drugs taken, and some medications can reach the fetus and cause harm. This makes pregnancy a unique physiological condition for which drug treatment presents a unique concern. Pregnancy is not preventable completely and may even pose a risk if a woman has a medical condition that needs to be treated intermittently or continuously, such as asthma, epilepsy, or hypertension. Additionally, during pregnancy, preexisting medical conditions (such as migraines and headache) can worsen or generate new ones requiring for pharmaceutical treatment. One of the traditional issues in the field of medicine is the risk that certain medications taken when pregnant could harm the fetus. Phocomalia was a birth defect that was caused by pregnant women who consumed thalidomide in the 1960s. There are numerous further documented cases of teratogenic medication effects. Research has shown that barely one percent of all congenital defects are brought on by human teratogenic drug usage. In order to assess the teratogenic risk of pharmaceuticals, the Food and Drug Administration, or FDA, created a system in 1979 that takes the caliber of data from research including both humans and animals into account. The FDA divides all medications taken during pregnancy into five groups: A, B, C, D, and X. Pregnancy is not suggested in any circumstance when using category X products; category A is thought to be the safest category. This gives the clinician therapeutic direction. Numerous facets of drug usage during pregnancy are the subject of this essay.*

Keywords: radiation ,ionizing agents, teratogen