



When Political Influence Undermines Evidence: The Risks of Unsubstantiated Medical Claims



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Dear Editor,

Global concern has emerged following a recent statement from the current US administration regarding the alleged risks of acetaminophen (paracetamol) use during pregnancy and its purported link to autism spectrum disorders. On September 22, 2025, US President Donald Trump, alongside Robert F. Kennedy Jr., claimed that pregnant women should avoid acetaminophen due to a supposed association with autism and other neurodevelopmental disorders. They urged regulators to modify drug labeling, effectively challenging the safety of a widely used, evidence-backed analgesic and antipyretic.¹ This statement, coming from figures with significant global influence, has sparked alarm and confusion among pregnant women and healthcare providers worldwide, risking widespread misinformation.

Acetaminophen, discovered in 1877 and approved by the Food and Drug Administration (FDA) in 1951, has been extensively studied and deemed safe for decades. Millions of patients have participated in clinical studies, including a robust Swedish nationwide sibling-comparison cohort of 2.48 million births, which found no significant association between prenatal acetaminophen exposure and autism spectrum disorder, attention deficit hyperactivity disorder, or intellectual disability.² Earlier meta-analyses suggested small potential associations, but these were limited by confounding factors and heterogeneity.³ More recently, a large population-based study from the Quebec Pregnancy Cohort reported that initially observed associations between prenatal acetaminophen exposure and attention deficit hyperactivity disorder were no longer present after probabilistic bias analysis accounting for exposure and outcome misclassification, suggesting that prior signals may have been driven, at least in part, by measurement error.^{2,4} Similarly, a nationwide

Japanese birth cohort study reported small increases in some neurodevelopmental outcomes in primary analyses, but sibling comparisons, probabilistic bias analyses for exposure misclassification, and negative exposure controls suggested that these estimates were likely biased and shifted toward the null.⁵ Based on current evidence, international agencies, including the World Health Organization (WHO), the American College of Obstetricians and Gynecologists, and the European Medicines Agency, continue to recommend acetaminophen as the first-line analgesic and antipyretic during pregnancy, provided it is used at the lowest effective dose for the shortest necessary duration.^{6,7}

History demonstrates the dangers of unsubstantiated health claims. During the COVID-19 pandemic, political endorsements of hydroxychloroquine and ivermectin led to inappropriate use and medication shortages despite their lack of efficacy.⁸ Similarly, vaccine hesitancy surged when public figures like Nicki Minaj and Novak Djokovic questioned vaccine safety, delaying uptake and undermining public health efforts.^{9,10} Beyond celebrity-driven misinformation, recent evidence from the United States shows that political controversy around regulatory processes can also increase vaccine hesitancy, not only against medicines. Carpenter et al found that vaccine hesitancy in the United States spiked between late August and early October 2020, with plausible triggers related to FDA-related political controversy and the electoral context, underscoring how perceived politicization of scientific authorization processes can undermine public trust.¹¹ These examples highlight how influential voices can distort health behaviors, often with harmful consequences.

The recent US government statement risks perpetuating misinformation, not only among pregnant women but also among parents of young children with febrile conditions. Untreated fevers can lead to serious complications, such as febrile seizures. Governments, particularly those of globally influential nations like the United States, play a critical role in shaping health decisions. Promoting claims with limited scientific backing undermines public trust and may trigger unnecessary fear. We urge policy-makers to prioritize evidence-based communication to safeguard public health and prevent the spread of misinformation.

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Ethical issues

Not applicable.

Conflicts of interest

Authors declare that they have no conflicts of interest.

Authors' contributions

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