

## COVID-19 and Pregnancy: Frequently Asked Questions for Patients

### What we know about COVID-19 and pregnancy

Coronaviruses are a family of viruses that cause respiratory tract infections that are usually mild, like the common cold. However, rare forms, such as COVID-19, can be very serious and even lead to death, especially in people with underlying chronic medical diseases (3).

Potential COVID-19 symptoms include fever, cough, and shortness of breath. Call your doctor (before seeking care) if you feel like you are developing these symptoms. Seek prompt medical attention if you develop emergency warning signs for COVID-19. These can include: difficulty breathing, persistent pain or pressure in the chest, new confusion or inability to rouse, bluish lips or face.

### **Transmission of the Virus**

- There is only limited information about COVID-19 in pregnancy.
- Based on related coronavirus infections (SARS-CoV)/(MERS-CoV)) and other viral infections, such as influenza and chickenpox, it is possible that pregnant women might be at greater risk of severe illness when compared with the general population (4,5).

*A report of nine pregnant women in China (2) found **no** sign that COVID-19 crossed the placenta and infected the baby. This lack of infection is consistent with what is seen with influenza.*

This same report (2) also found no evidence of COVID-19 in the breast milk of infected women. *Breastfeeding is encouraged* and is a potentially important source of antibody protection for the infant. The CDC (6) recommends that if a temporary separation occurs, women who intend to breastfeed should be encouraged to express their breast milk to establish and maintain milk supply.

Follow these guidelines for breastfeeding:

- If possible, a dedicated breast pump should be provided.
- Before expressing breast milk, women should practice appropriate hand hygiene.
- After pumping, all parts of the pump that come into contact with breast milk should be thoroughly washed, and the entire pump should be appropriately disinfected per the manufacturer's instructions.
- Expressed breast milk should be fed to the newborn by a healthy caregiver.

Otherwise, the CDC recommends that if a woman and newborn do room-in and the woman wishes to feed at the breast, she should put on a facemask and practice hand hygiene before each feeding.

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### **What we do not know about COVID-19**

Right now, we don't have much information about the complications associated with having COVID-19 early in pregnancy (first and second trimesters). Specifically, we don't know anything about the risk of miscarriage or congenital anomalies. Information from the SARS epidemic (7) is reassuring and suggests no increased risk of fetal loss or congenital anomalies associated with infection early in pregnancy.

Preterm delivery has been reported among infants born to women positive for COVID-19 during pregnancy but not all of them were due to maternal infection. All of the infants in this single report were clinically well, and no neonatal deaths were reported (2).

Infants have been born preterm and/or small even at the due date to women with serious illness due to coronavirus infections, including SARS-CoV and MERS-CoV, during pregnancy (4, 5).

### **What can you do?**

Pregnant women should do the same things everyone does to prevent COVID 19 (9):

- Frequent handwashing with soap and water – scrub for at least 20 seconds
- Social distancing
- Stay away from sick people
- Stay home if sick
- Cover coughs and sneezes
- Clean and disinfect frequently used surface areas
- Minimize touching your face, eyes, nose, mouth

Human coronaviruses most commonly spread from an infected person to others through a variety of means, such as airborne droplets from coughing and sneezing; close personal contact, including touching and shaking hands; and touching one's nose, mouth, or eyes before washing one's hands. It is currently unknown if the virus can be spread through semen or sexual intercourse (8).

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