

Pregnancy and COVID-19: Keeping Moms and Babies Safe

UC Health is actively working to keep moms and babies safe during this time, and we want to relieve some of your concern. "Pregnancy is a time that often causes anxiety for expectant couples. The fear of the unknown and need for reassurance that the baby is safe while it is in the womb and will be safe during labor and birth is paramount in the minds of expectant parents," shares Emily DeFranco, DO, UC Health maternal-fetal medicine specialist and professor of obstetrics & gynecology at the University of Cincinnati College of Medicine. "Although it appears that pregnancy does not place a woman at higher risk of infection with the virus that causes COVID-19 or its complications, many women have questions about how this pandemic affects other aspects of their prenatal care and delivery plans. We are making all efforts to minimize your risk of being exposed to the virus while continuing to provide the necessary medical care needed to help you have a healthy baby."

While guidance for pregnant women will continue to evolve, UC Health is here to help put your mind at ease by answering the most commonly asked questions among expecting mothers.

Am I more likely to get COVID-19 or have a severe complication if I become infected because I'm pregnant?

We do not currently know if pregnant women have a greater chance of getting sick from COVID-19 than the general public, nor whether they are more likely to have serious illness as a result. Current reports are limited but have shown that pregnant women do not have more severe symptoms than the general public.

With viruses from the same family as COVID-19 and other viral respiratory infections, such as influenza, women have had a higher risk of developing severe illness. But researchers are still learning how the illness affects pregnant women. It is always important for pregnant women to protect themselves from any illness. Doctors urge pregnant women to take the same steps as the general public to avoid coronavirus infection.

Can I give COVID-19 to my baby if I get it while I'm pregnant?

The evidence for COVID-19 vertical transmission (mother to fetus) is very limited, and there have been no reported cases of this occurring as referenced by the Centers for Disease Control and Prevention (CDC) and Society for Maternal-Fetal Medicine (SMFM). This information is limited to maternal COVID-19 exposure in the third trimester of pregnancy. The risk for vertical transmission during the first and second trimesters is currently unknown as these pregnancies have not yet been delivered. However, there is no evidence that maternal COVID-19 infection during the first and second trimesters has an increased risk for pregnancy loss.

Is it safe for me to go to my prenatal appointments?

The safety of our patients and staff is our top priority. At this time, we are implementing multiple measures to keep you and your baby safe while providing excellent prenatal care. We are following national guidelines to streamline your prenatal visits to provide adequate care with minimal risk.

All visits are being screened to determine if your appointment can be conducted via phone or video call. Prior to office visits, patients undergo a COVID-19 screening to prevent exposed or infected individuals from entering our office. To further protect you and our clinical staff, we are prohibiting visitors at office appointments to limit exposure risk.

Our providers and staff are practicing good hand hygiene, implementing social distancing and complying with CDC recommendations for cleaning rooms and equipment between patient encounters. With these measures in place, it is safe and recommended that you continue to receive prenatal care to ensure the best outcome for you and your baby.

Is it safe for me to deliver at the hospital or should I deliver at home?

We continue to recommend delivery in a hospital or an accredited birthing center. Labor and delivery units across the country are making specific preparations within their programs to decrease the spread of coronavirus. We are screening patients and visitors for signs of illness, limiting the number of visitors and following strict guidelines from the CDC and Ohio Department of Health to prevent the spread of coronavirus in our hospitals. We know that planned homebirth is associated with a more than two-fold increased risk of perinatal death and a three-fold increased risk of neonatal seizures or serious neurologic dysfunction. The American College of Obstetricians and Gynecologists believes that hospitals and accredited birth centers are the safest settings for you to give birth.

Can I have a support person with me during labor?

We understand the fears and concerns expecting mothers have regarding support during labor. The birth of a child is a very special time not only for a mother, but for family and friends as well. At the same time, pregnant women and infants are considered higher risk groups for infections, and properly protecting you and your baby is our utmost concern. Hospitals, where ill patients are cared for, can be high risk locations for the spread of COVID-19. This has led to some hospitals eliminating patient visitors altogether. However, we understand the value of support during the labor and delivery process, and we need to balance the benefit of having support during labor while keeping the risk of COVID-19 exposure as low as possible. Therefore, we currently are allowing one support person who can be in the room with you during your labor and birth.

Will my baby be taken away from me if I have or show symptoms of COVID-19?

In order to provide the best care for you and your baby, University of Cincinnati Medical Center has set aside an area of the neonatal intensive care unit (NICU), and West Chester Hospital has set aside an area of the special care nursery specifically for babies of moms who have been diagnosed with COVID-19 or are exhibiting COVID-19 symptoms. After delivery, your baby will be transported to this designated area for care. You are able to designate one healthy, non-exposed support person to visit your baby in the NICU or special care nursery. Unfortunately, we would not be able to let mothers visit their babies until they have recovered from the illness in order to keep babies and the clinical staff caring for the babies safe.

Exceptions to this rule will be made on a case-by-case basis depending on illness severity, laboratory testing and constantly evolving guidelines from our infectious disease specialists, hospital administration and public health officials. Our goal is to reunite you with your baby as soon as it is safe to do so.

Can I breastfeed my baby if I have COVID-19 or show symptoms of COVID-19?

There are many things we do not know about COVID-19, but so far, COVID-19 and viruses like COVID-19 have not been found in breast milk. If you have symptoms of COVID-19 or if you have the diagnosis of COVID-19 at your baby's birth, your baby will go to the NICU or special care nursery to have their health evaluated after delivery. We will make sure the baby is not showing signs of infection or difficulty breathing. The amount of time it takes before your baby returns to you will be on a case-by-case basis after discussion with you, the healthcare team and public health officials. Your safety and the safety of your baby is our biggest concern. If you must be separated, we encourage you to breastfeed by pumping and having a healthy, non-exposed caregiver provide the expressed milk.

If you are diagnosed with or develop symptoms of COVID-19 while at home, the CDC supports breastfeeding with precautions. If you have COVID-19 or symptoms of the virus, you should wash your hands before touching your baby. If breastfeeding, wash your hands and if possible, wear a mask if feeding at the breast. If you are pumping, wash your hands before touching pump parts and bottles. Wash all pump parts and bottles before and after use. If possible, have someone who is healthy feed the breast milk to the infant.

Who do I call if I've been exposed to COVID-19 or have symptoms of COVID-19?

If you are pregnant and have been exposed to COVID-19 or have symptoms of COVID-19, we recommend that you call your OB/GYN provider. Your provider may or may not recommend testing depending on your exposure risk and symptoms.

Is it safe for me to take NSAIDs for symptoms? Are there other medications I can take while pregnant if I have COVID-19?

- There is some concern in the emerging literature that the use of anti-inflammatory medications (NSAIDs, such as ibuprofen) to treat symptoms of COVID-19, such as fever, may actually worsen the disease.
- In general, unless there are special circumstances, it is best to try and avoid use of most NSAIDs like ibuprofen during pregnancy. Some women may have medical reasons why their obstetric provider recommends baby aspirin during pregnancy. In this case, we recommend continuing baby aspirin for your medical indications as long as you do not have COVID-19 infection or symptoms.
- We DO NOT recommend use of NSAIDs for symptom management of COVID-19 during pregnancy.

- Ibuprofen is often recommended for treatment of pain after you give birth. However, if you have suspected or confirmed COVID-19, we DO NOT recommend use of NSAIDs like ibuprofen.
- If you develop any symptoms of coronavirus such as fever, cough or shortness of breath, we advise you to treat them with acetaminophen (Tylenol) rather than ibuprofen containing medications. It is important to stay hydrated and get rest if you develop symptoms, and if they progress or worsen, call your healthcare provider.

Should I stop working outside my home while I'm pregnant?

Work from home is always preferred as this minimizes your risk of exposure to COVID-19. However, working from home is not always feasible with some jobs. While pregnant women do experience some changes to their immune systems that place them at risk for severe illness, we do not have sufficient evidence that pregnancy increases such risk with COVID-19. We recommend following the same guidelines set forth by the CDC to the general public. Recommendations to stop the spread of infection include:

- Cover your cough (using your elbow is a good technique).
- Avoid people who are sick.
- Practice social distancing (leave 6 feet between you and others).
- Clean your hands often using soap and water or alcohol-based hand sanitizer.
- If you are sick, do not go to work. Your doctor can guide whether or not you should seek medical care.

I am pregnant and a healthcare worker. Can I continue to work while I'm pregnant? And can I take care of patients with COVID-19?

Yes, you may continue to work in the healthcare field while pregnant. Pregnant women should follow the CDC's recommendations for prevention of infection, including frequent hand washing and appropriate use of personal protective equipment. If feasible, it may be appropriate for facilities to limit exposure of pregnant healthcare workers to patients with confirmed or suspected COVID-19, especially during aerosol-generating procedures. We recommend that you discuss your expected duties and possible patient assignments with your supervisors when appropriate.

Resources:

American College of Obstetricians and Gynecologists. Practice Advisory. March 2020. Novel Coronavirus 2019. <https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2020/03/novel-coronavirus-2019>

Center for Disease Control and Prevention. Coronavirus Disease 2019 (COVID-19) Inpatient Obstetric Healthcare Guidance. Interim Considerations for Infection Prevention and Control of Coronavirus Disease 2019 (COVID-19) in Inpatient Obstetric Healthcare Settings. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/inpatient-obstetric-healthcare-guidance.html>