

COVID-19 Virus Infection and Pregnancy

Information for pregnant women and their families

What effect does coronavirus have on pregnant women?

Pregnant women do not appear to be more susceptible to the consequences of coronavirus than the general population. As this is a new virus, how it may affect you is not yet clear. It is expected the large majority of pregnant women will experience only mild or moderate cold/flu like symptoms.

More severe symptoms such as pneumonia appear to be more common in older people, those with weakened immune systems or long-term conditions. There are no reported deaths of pregnant women from coronavirus at the moment.

If you are pregnant you are more vulnerable to getting infections than a woman who is not pregnant. If you have an underlying heart or lung condition, such as asthma, you may be more unwell if you have coronavirus.

What effect will coronavirus have on my baby if I am diagnosed with the infection?

As this is a very new virus, we are just beginning to learn about it. There is no evidence to suggest an increased risk of miscarriage. There is also no evidence that the virus can pass to your developing baby while you are pregnant (this is called vertical transmission). It is therefore considered unlikely that if you have the virus it will cause abnormalities in your baby.

Some babies born to women with symptoms of coronavirus in China have been born prematurely. It is unclear whether coronavirus caused this or the doctors made the decision for the baby to be born early because the woman was unwell. As we learn about the risk of pre-term birth and coronavirus infection, we will update this information.

What can I do to reduce my risk of catching coronavirus?

The most important thing to do is to wash your hands regularly and effectively as soon as you come from public places to your home or workplace.

What is the travel advice if I am pregnant?

Follow the government advice on the Smartraveller website.

All individuals, including pregnant women, should ensure they have adequate insurance arrangements prior to travel. You should also check that your travel insurance will provide cover for birth and care of your newborn baby if you give birth while abroad.

What should I do if I think I may have coronavirus or been exposed?

If you are pregnant and:

- You think you might have coronavirus
- In the last 14 days you've been to a country or area with a high risk of coronavirus – see the Smartraveller website
- You've been in close contact with someone with coronavirus

Contact this office during office hours, otherwise contact the Mater Women's Unit.

How will I be tested for coronavirus?

The process for diagnosing coronavirus infection is changing rapidly. At the current time, if you need a test for coronavirus, you will be advised to self-isolate and diagnostic swabs will be arranged. You may need to attend a hospital or be tested at home.

You will be tested in the same way as anyone being tested, regardless of the fact that you are pregnant. Currently, the test involves swabs being taken from your mouth and nose. You may also be asked to cough up sputum, a mixture of saliva and mucus.

What should I do if I test positive for coronavirus?

If you test positive for coronavirus, you should contact this office to make us aware of your diagnosis. If you have no symptoms, or mild symptoms, you will be advised to recover at home. If you have more severe symptoms, you might be treated in a hospital setting.

Q. Why would I be asked to self-isolate?

You may be advised to self-isolate because:

- You have come into contact with someone who has coronavirus
- You have visited a particular area or country with a high-risk of coronavirus
- You have symptoms suggestive of coronavirus and are waiting to be tested, or waiting for your results
- You have tested positive for coronavirus and you've been advised to recover at home

What should I do if I'm asked to self-isolate?

Pregnant women who have been advised to self-isolate should stay indoors and avoid contact with others for 14 days. General advice includes:

- Do not go to school, work, or public areas
- Do not to use public transport
- Stay at home and do not allow visitors
- Ventilate the rooms where you are by opening a window
- Separate yourself from other members of the household as far as possible, using your own towels, crockery and utensils and eating at different times
- Use friends, family or delivery services to run errands, but advise them to leave items outside.

You may wish to consider online fitness routines to keep active, such as pregnancy yoga or Pilates.

Can I still attend my antenatal appointments if I am in self-isolation?

Contact us to say that you are currently in self-isolation for possible/confirmed coronavirus and request advice on attending routine antenatal appointments.

It is likely that routine antenatal appointments will be delayed until your period of isolation ends. If we feel that your appointment cannot wait, the necessary arrangements will be made for you to be seen. For example, you may be asked to attend at a different time, or in a different place, to protect other patients.

How will my care be managed after I have recovered from coronavirus?

As a precautionary approach, an ultrasound scan will be arranged 14 days after your recovery, to check that your baby is well. This 14-day period may be reduced as more information on how infected people are in recovery becomes available.

If you have recovered from coronavirus and tested negative for the virus before you go into labour, where and how you give birth will not be affected by your previous illness.

What do I do if I feel unwell or I'm worried about my baby during self-isolation?

Pregnant women are advised not to attend maternity units or A&E unless in need of urgent pregnancy or medical care.

If you have concerns about the wellbeing of yourself or your unborn baby during your self-isolation period, contact us or, out-of-hours, the Mater Women's Unit. We will provide further advice, including whether you need to attend hospital.

If attendance at the hospital is advised, pregnant women are requested to travel by private transport, or arrange hospital transport, and alert the maternity reception once on the premises, prior to entering the hospital.

Will being in self-isolation for suspected or confirmed coronavirus affect where I give birth?

We want you to give birth in the Mater Women's Unit where the baby can be monitored using continuous electronic fetal monitoring, and your oxygen levels can be monitored hourly.

The continuous fetal monitoring is to check how your baby is coping with labour. As continuous fetal monitoring can only take place in an obstetric unit, where doctors and midwives are present, it is not currently recommended that you give birth at home.

We will keep this advice continually updated as new evidence emerges.

Will being in self-isolation for suspected or confirmed coronavirus affect how I give birth?

There is currently no evidence to suggest you cannot give birth vaginally or that you would be safer having a caesarean birth if you have suspected or confirmed coronavirus, so your birth plan should be followed as closely as possible based on your wishes.

However, if your respiratory condition (breathing) is such that urgent delivery would be needed, a caesarean birth may be recommended.

There is no evidence that women with suspected or confirmed coronavirus cannot have an epidural or a spinal block. However, the use of Entonox (gas and air) may increase aerosolisation and spread of the virus, so your maternity team will discuss all the options with you in early labour to ensure you are aware of the pain relief options available to you.

What happens if I go into labour during my self-isolation period?

If you go into labour, you should call Mater Women's Unit for advice, and inform them that you have suspected or confirmed coronavirus infection.

If you have mild symptoms, you will be encouraged to remain at home (self-isolating) in early labour, as per standard practice.

Your maternity team has been advised on ways to ensure you and your baby receive safe, quality care, respecting your birth plan as closely as possible.

When the Mater Women's Unit team decides you need to attend the birthing unit, general recommendations about hospital attendance will apply:

- You will be advised to attend hospital via private transport where possible, or call 000 for advice as appropriate
- You will be met at the maternity unit entrance and provided with a surgical face mask, which will need to stay on until you are isolated in a suitable room
- Your birth partner(s) will be able to stay with you throughout, but visitors should be kept to a minimum

Could I pass coronavirus to my baby?

As this is a new virus, there is limited evidence about managing women with coronavirus infection who have just given birth; however, there are no reports of women diagnosed with coronavirus during the third trimester of pregnancy having passed the virus to their babies while in the womb.

Will my baby be tested for coronavirus?

Yes, if you have suspected or confirmed coronavirus at the time your baby is born, your baby will be tested for coronavirus.

Will I be able to stay with my baby/give skin-to-skin if I have suspected or confirmed coronavirus?

Yes, if that is your choice. Provided your baby is well and doesn't require care in the neonatal unit, you will be kept together after you have given birth.

There are some reports from China which suggest women with confirmed coronavirus have been advised to separate from their baby for 14 days. However, this may have potential negative effects on feeding and bonding.

A discussion about the risks and benefits should take place between you and your family and the doctors caring for your baby (neonatologists) to individualise care for your baby.

This guidance may change as knowledge evolves.

Will I be able to breastfeed my baby?

Yes. At the moment there is no evidence that the virus can be carried in breastmilk, so it's felt that the well-recognised benefits of breastfeeding outweigh any potential risks of transmission of coronavirus through breastmilk.

The main risk of breastfeeding is close contact between you and your baby, as you may share infective airborne droplets, leading to infection of the baby after birth.

A discussion about the risks and benefits of breastfeeding should take place between you and your family and your maternity team.

This guidance may change as knowledge evolves.

If you choose to breastfeed your baby, the following precautions are recommended:

- Wash your hands before touching your baby, breast pump or bottles
- Wear a face-mask for feeding at the breast
- Follow recommendations for pump cleaning after each use
- Consider asking someone who is well to feed expressed breast milk to your baby.

If you choose to feed your baby with formula or expressed milk, it is recommended that you follow strict adherence to sterilisation guidelines. If you are expressing breast milk in hospital, a dedicated breast pump should be used.

This information is correct as at 18 March 2020