

COVID-19 DURING PREGNANCY

Patient Information Sheet

This information sheet is to help you understand **COVID-19** during pregnancy. Please note that information becomes available on a daily basis. We encourage you to talk to your doctor or midwife for the most up-to-date information.

What is COVID-19?

SARS-CoV-2 (also known as COvid-19) is a human coronavirus 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.

COVID-19 is a new disease and we are still learning how it affects pregnant women. There is currently no evidence that suggests pregnant women are at a higher risk of becoming seriously ill from COVID-19. There is currently no evidence that a developing child could be negatively affected by COVID-19.

Throughout pregnancy, women experience changes in their bodies that may increase the risk of other illnesses, such as viral respiratory infections. This is why it is important for pregnant women, especially those at high risk of developing severe complications, to take the following precautions to protect against the possibility of becoming ill:

- **Stay home**
- **Talk to your doctor, obstetrician or midwife** about the possibility of telephone or videoconference appointments.
- **Avoid visitors**
- **Wash your hands** often with soap and water for at least 20 seconds or, if not available, use alcohol-based hand sanitizer.
- **Practice physical distancing.** Keep a distance of at least two metres from others.
- **Avoid touching** your mouth, nose, and eyes.
- **If you must leave home for essentials, avoid crowded places and peak-hours.** If possible, have a friend or relative get your essentials and drop at your doorstep.
- **Avoid travel by public transit.**

If you have been diagnosed with COVID-19, or are waiting to hear the results of a lab test for COVID-19, **you must isolate at home.**

What are the symptoms of COVID-19?

Those who are infected with COVID-19 may have little to no symptoms. You may not know you have symptoms of COVID-19 because they are similar to a cold or flu. Symptoms may take up to 14 days to appear after exposure to COVID-19. Symptoms include: fever, new or worsening chronic cough, shortness of breath, sore throat, runny nose, headache, a new onset of fatigue, a new onset of muscle pain, diarrhea, loss of sense of taste, or lost of sense of smell. The most common presentation of COVID-19 in pregnancy is fever (greater than 37.8°C) and cough.

If you feel unwell and have symptoms of illness, contact your doctor, midwife or 811.

Recent evidence indicates that the virus can be transmitted to others from someone who is infected but not showing symptoms. This includes people who:

- have not yet developed symptoms (pre-symptomatic)
- never develop symptoms (asymptomatic)

When should I see my doctor or midwife, and what if I need to go to the hospital?

You will have appointments with doctors and midwives throughout your pregnancy. Your perinatal appointments are important for your health and that of your baby and should only be missed after discussion with your doctor or midwife. Some visits can be done by telephone and your doctor or midwife will consider this if appropriate for you.

If you experience problems in the pregnancy, you should not hesitate to contact your doctor, midwife or the labour and birth unit at your local hospital.

If you are being tested or have tested positive for COVID-19 or have been in close contact with someone who is being tested or tested positive for COVID-19, contact your doctor or midwife **immediately!**

If you feel the need to come to the hospital, either because of COVID-19 related symptoms, you are having problems with your pregnancy, or you are in labour, **please call the labour and birth unit of your local hospital prior to coming to the hospital.** They will inform you of the next steps.

Labour And Birth Unit Contacts

The Moncton Hospital: **857-5121**
Dr. Everett Chalmers Regional Hospital: **452-5349**
Saint John Regional Hospital: **648-6146**
Upper River Valley Hospital: **375-2611**
Miramichi Regional Hospital: **623-3205**

Is it dangerous for my baby if I get COVID-19 when pregnant?

We have very little information to know if the virus passes from mothers to babies during pregnancy. There are no signs that COVID-19 increases the risks of birth defects.

The biggest risk for the baby is if you get very sick and go into labour before your due date or the doctors or midwives recommend you deliver early because the baby is not doing well as a result of how sick you are. Most experts recommend at least one ultrasound 2 to 4 weeks after the end of the infection to make sure the baby is growing well. It is also recommended that regular ultrasound exams continue to be done at least every 4 weeks throughout the pregnancy to check on how the baby continues to grow.

Is there anything I should know about giving birth during the COVID-19 pandemic?

There is currently no evidence of mother-to-child transmission through childbirth when the mother gets COVID-19 in the third trimester.

At this time, birthing mothers are allowed one support person to accompany them during labour, delivery, and postpartum. This support person must be well without any symptoms, cannot be awaiting results, or be positive for COVID-19 or have travelled outside the province in the last 14 days. This support person cannot change during the course of your hospitalization. Your support person should remain in the room with you for the majority of your stay. There is a no-visitor policy in affect otherwise.

If you plan to give birth at home with your midwife, talk to your midwife to see whether homebirth is still an option for you.

Once you return home, you need to continue to follow public health recommendations, including staying home, no visitors and physical distancing.

Is it dangerous for my baby if I have COVID-19 when I go in labour or if I get it soon after giving birth?

If you have COVID-19, talk to your health care provider about the preferred birth plan. The birth plan should be individualized and based on your preferences, the safety of the care provider, as well as obstetric recommendations.

Your health care provider will consult perinatal (immediately before birth), neonatal (after birth), infectious disease and intensive care specialists, as required.

You should discuss and make an informed decision with your health care provider and your family about the potential risks and benefits of rooming-in with your baby. There is some evidence to suggest that babies can be infected with COVID-19 after birth. As such, when a mother has suspected or proven COVID-19, voluntary separation may be considered as a recommendation in the future.

If you have or may have COVID-19, you must [isolate yourself](#) in your home; this includes practicing [physical distancing](#) in your home, with the only exception being the baby. You can stay together in the same room as your baby if preferred, especially during the establishment of breastfeeding and bonding.

You should be careful to avoid passing on the virus to your baby. This is best done by washing your hands before touching the baby, avoiding touching the baby's face, avoiding coughing or sneezing on the baby and wearing a mask when caring for your baby. When not caring directly for your baby (when baby is sleeping for example), try to remain at least 2 meters or 6 feet away to decrease the risk of infection to the baby.

Can I breastfeed if I have COVID-19?

The virus that causes COVID-19 has not been found in breast milk and it is unlikely that COVID-19 can be transmitted while breastfeeding.

Breastfeeding is the safest way to feed your baby/young child.

Breast milk has antibodies and immune factors that protect your baby's health.

As with other respiratory illnesses, if you are breastfeeding you are encouraged to continue.

Expressing breast milk, either manually or with an electric breast pump, may be done. Wash your hands and your breast before and after touching your breast, the pump or bottle parts. If you have or may have COVID-19, someone who is well could feed the expressed milk to your baby if you are unable.

Whether breastfeeding or bottle feeding, if you have or may have COVID-19 you should take precautions to prevent transmission to your baby. You should wear a mask when near your baby, including during feeding and wash your hands and your breast.

If you are feeding your infant with infant formula you should keep a two-week supply on hand. Infant formula should be prepared using strict sterilization techniques.

References

Public Health Agency of Canada. Pregnancy, childbirth and caring for newborns: advice to mothers (COVID-19). 2020. Accessed April 8th,2020.

<https://www.canada.ca/en/public-health/services/publications/diseases-conditions/pregnancy-advise-mothers.html>

Canadian Pediatric Society Practice Point. Breastfeeding when mothers have suspected or proven COVID-19 (April 2020): Dr. Michael Narvey, Chair, Fetus and Newborn Committee. Accessed April 14th, 2020. <https://www.cps.ca/en/documents/position/breastfeeding-when-mothers-have-suspected-or-proven-covid-19>

Government of New Brunswick. Office of the Chief Medical Officer of Health. Pregnancy, Infant Feeding and COVID-19 Key Messages. 2020.