

Coronavirus (COVID-19) and Pregnancy- What you Need to Know

This is a really scary time for all of us, and no more so than for our pregnant patients. While information is changing daily, this is the most up to date information that we have as of March 18, 2020, and we will continue to update you as the situation progresses.

Here is a list of the most frequently asked questions (FAQs) regarding COVID-19 and pregnancy.

How do I know if I have COVID-19?

The virus usually presents similar to the flu, with runny nose, cough, fever and body aches. As it progresses some patients develop shortness of breath and pneumonia (fluid in the lungs). Fever seems to be universal in positive patients, whereas common colds and allergies will not present with a fever. If you have these symptoms we would have high suspicion, and would test you for the flu and other viruses like mono-nucleosis. If those common tests were negative, we would treat you as if you are positive for COVID-19. At this time, testing for COVID-19 has limited availability due to a shortage of resources, and we are not able to test in our office. Several local hospitals are able to do testing, although there is an argument that testing is not helpful since there is no treatment available, and social isolation is the only recommended treatment for mild to moderate cases. Testing is currently recommended for patients who are very sick and need to be hospitalized (with pneumonia, for example) so that appropriate quarantine measures can be taken in the hospital.

How do you get COVID-19?

This is a respiratory virus that is spread through droplets in the air from an infected person-which can either be directly inhaled or can be passed by touching a surface which has contacted droplets, and then touching your face with infected hands so that the virus enters your nose or mouth. We know that droplets can remain in the air for hours and can survive on certain surfaces for several days. This is why handwashing is so important, and not touching your face with your hands if they have been in contact with potentially infected surfaces. The average time from exposure to symptoms is 5 days, but could be as long as 14 days.

How long is a sick person infectious?

Emerging studies suggest that sick patients are unlikely to be infectious 10 days after they first are symptomatic. The most contagious days seem to be around day 5 of the illness. To be cautious, current recommendations are to quarantine sick patients for 14 days.

Does COVID-19 cause birth defects or pregnancy problems?

Since this virus was only discovered a few months ago there is very little information about this yet. Birth defects occur in the first and second trimester of pregnancy, but so far there is no

evidence to suggest that the virus causes direct harm to the fetus. We know from many years of studying similar viruses in the same corona family that the baby is not directly affected, so assume this will be the same for COVID-19. Hypothetically, if a pregnant woman were to get very sick with pneumonia (from any source) this could increase the chance of preterm labor and early delivery. However there is no data to support that yet- it is simply what we know from other cases of severe pneumonia in pregnancy.

Should I get tested for COVID-19?

As addressed above, testing is currently only recommended for very sick patients who require hospitalization, since there is no treatment available and test supplies are quite limited.

What if I am due soon? What should I expect?

If you are due soon, rest assured that the hospital is still running at full speed, and that we do not expect your delivery to be impacted. You will notice some increase vigilance at the hospital, with only one visitor allowed per patient, and increased focus on hand washing and cleaning of surfaces. Woman's Hospital is not taking care of sick patients with COVID-19, and we are very aware of the importance of protecting you and your newborn from the virus. Our recommendation will be for you to be discharged as soon as possible, as you will both be safer at home after the baby is born.

Is it safe to come into the office for visits?

Currently we are still seeing pregnant patients in the office but recognize that as things progress it may be safer for you to stay home. We have telemedicine available as a resource that we may offer to pregnant patients for certain visits in the future. We will be updating you about this as things progress.

What are you doing to reduce my risk at the office and hospital?

The greatest risk that we all have is being exposed to more people, and our primary goal is to limit your exposure to others who may be infected. For that reason we are limiting visitors to our office to patients only. While we know how hard that can be with childcare and family members who love and support you in your pregnancy, it's important to consider that every person you contact could potentially be infected, and limiting the number of people with whom you have close contact is very important. We are increasing our vigilance with handwashing and cleaning common surfaces and bathrooms, and we are asking patients to wash their hands before and after each visit. All patients are being screened with a short questionnaire before entering the office, and anyone felt to be a risk is required to wear a mask and to be confined to a separate area of the office. Similar processes are in place at the hospital.

Should I wear a mask?

The only patients who should wear a mask in our office are those who are symptomatic, or those who have positive answers to some of our other screening questions, to reduce the chances of them passing the virus to others. There is no evidence that wearing a mask helps prevent you from getting infected in regular daily activities. This is why your healthcare workers are not wearing masks in the office. In fact recent studies suggest that wearing a mask may increase your chance of exposure, because we tend to touch our face much more frequently when we are masked.

If I get symptoms of COVID-19 what should I do?

If you have symptoms, please call or email us BEFORE coming into the office so we can assess you and see what the best next steps will be. For obvious reasons, if you are sick we do not want you to infect others in the office so please be considerate and call us first.

What are the chances of dying from COVID-19?

This is a tricky question to answer but based on data from China it seems to be around 3 % overall, with the highest numbers being in elderly patients. The average age for patients who have died and are known to be COVID-19 positive is 70. In comparison, the death rate for regular influenza is around 1%. We don't know what the death rate is for pregnant patients since there is so little data, but keep in mind the chance of dying is quite low.

How many people have been infected? Is it really that bad?

This is an impossible question to answer because the vast majority of infected people have not been tested. The numbers are changing every day, and those that are reported are readily available on Google. It's important to know, though, that most people with COVID-19 are not counted and the numbers are much higher than those reported- which is why it is important to assume that anyone might have it.

When will a vaccine be available and is it safe in pregnancy?

While researchers are working night and day to develop a vaccine, we are still months away from that being commercially available. We don't know yet whether this will be a vaccine that is recommended in pregnancy or not.

Does COVID-19 differ for pregnant and non-pregnant women?

Pregnant women are unique in that they have a suppressed immune system, so as not to attack the baby as a foreign invader. For this reason we know that pregnant women are more susceptible to most viruses like the flu, so it is reasonable to assume that the same is true for COVID-19. We also know that when pregnant women do get sick with the flu (for example) they

are more likely to get more serious complications like pneumonia. So although there is very little data on COVID-19 in pregnancy so far, we are assuming that it may run a similar course and be more severe in pregnant patients.

Can COVID-19 be transmitted through pregnancy or breastfeeding?

There is very little information available about “vertical” transmission of the virus from mother to baby, but so far there is no evidence that babies can get the virus in the uterus and get sick. There is also no evidence that the virus can be passed to the baby in breast milk, but currently we would recommend caution and avoid breast feeding if you are COVID-19 positive until 2 weeks after you were first symptomatic.

What can I do to reduce my chances of contracting COVID-19?

Since we know that the virus is spread through droplets and through surfaces carrying those droplets, staying more than 6 feet away from others (outside your family) and frequent hand washing or use of a hand sanitizer after touching any potentially contaminated surfaces is wise. We are recommending social isolation for all our pregnant patients (and all people in general)- which includes avoiding any groups of people, staying at home unless you absolutely need to go out (to a doctor’s visit for example), and working from home if at all possible.

If you have other children home from school, we recommend the same for them, and limit play dates and exposure to others. Although we think people are most contagious when they are symptomatic, it is possible that people may be contagious without having symptoms, or even before symptoms start.

What if someone in my family is positive?

Current recommendations if we have a sick family member are to isolate the sick person to one room of the house, and preferably have someone who is not pregnant be their primary caretaker. The sick person should wear a mask, and the caretaker in this case should also wear a mask and gloves when interacting, and wash hands thoroughly before and after interacting with the patient. Common areas like bathrooms should be frequently cleaned with antiseptic cleaning products, and care should be taken not to touch your face unless your hands have been well cleaned. Common clothing, sheets and other cloth items should be thoroughly washed. Sick patients should be quarantined for 2 weeks.

Please let us know if you have any other questions and we will continue to update this FAQ list as the situation progresses.

Best wishes,

Your CWCC providers and team

