Airborne Infections and Viruses: As If We Didn't Have Enough to Worry About As Moms-To-Be

By Debra Goniwicha, MSW, MotherToBaby Georgia

I have spent a significant portion of my career working in hospitals. Shortly after learning I was pregnant with my first child, I received a notice that I may have been exposed to an airborne illness while I was at work in the hospital Emergency Room. The notice advised me to report to occupational health for further testing. I flipped out! I was scared to death that my exposure would cause harm to my baby. I was mad at the world for exposing my baby to potential harm and I was mad at myself for not being more aware of the contagious illnesses that I was surrounded by on a daily basis. But mostly, I was terrified.

An airborne infection is an illness spread by little drops of liquid (germs) that float through the air. Airborne illness occurs when someone who is infected coughs or sneezes sending the germs into the air, exposing individuals nearby to potential illness from breathing in the infection or touching surfaces where the drops land. Tuberculosis, chicken pox, and measles are all types of airborne infections. Since February happens to be International Prenatal Infection Prevention Month, I thought it would be a great time to discuss how to best avoid airborne infections in pregnancy.

So back to my own airborne illness exposure… there I was on my way down to occupational health. I was, of course, creating several devastating scenarios in my head. The logical part of my brain was recalling this was absolutely NOT the first time that I had received notice that I had been exposed to something contagious and that while every exposure notice made me worry a bit, I'd get tested, the results were fine, and I'd go on with my life. But this time I was pregnant, and it wasn't just my life that I was worried about. It was the life and health of my much wanted, growing baby. I was fully aware how dangerous infections could be in pregnancy. I had witnessed infants in the neonatal intensive care that were born to mothers with untreated infections.

Arriving at occupational health, I was directed to a room by a nurse and immediately started sobbing. I hadn't yet told my boss or coworkers that I was pregnant. I was superstitious, it was my first pregnancy, and I believed that you were not supposed to tell people the news until you were 12 weeks pregnant. As I stammered out why I was there, an amazing nurse (who I remember to this day) handed me tissues and gave me the best reassurance and education possible about airborne infections during pregnancy.

The nurse reminded me that I was regularly doing many things to prevent airborne infection. These include:

Handwashing – Because of working in healthcare I am very knowledgeable about the fine art of handwashing. Hands need to be wet, then apply soap and rub your hands together for 20 seconds (quick tip: singing Happy Birthday while rubbing your hands together will equal 20 seconds!). Rinse your hands and dry with paper towel.

Immunizations – Remaining current on vaccinations can go a long way to preventing an infection from an airborne illness. Examples include vaccinations to protect from the seasonal flu, the measles, pertussis (whooping cough), and bacterial meningitis. Thankfully, I was current on all my vaccinations. After this incident, I also reminded my family members to make sure they were current on their immunizations as well. Since I was pregnant, I really did not want anybody near me bringing home infections to share!

Droplet Precautions – This refers to avoiding droplets that might come from an infected person's coughing or sneezing. Working in a hospital has taught me many things. One of them is to stand back and to the side when someone is coughing. This helps to minimize direct contact of flying particles. Also, be very aware of what you touch. Touching surfaces and then touching your eyes, nose or mouth increases contact with droplets that may contain infection. Wearing a mask over your mouth and nose also can reduce exposure to airborne droplets that contain germs.

Getting Tested and, if needed, Treatment – Most important, after learning I had been exposed, I was getting

tested for infection. If the tests were positive, I could be treated before the baby was born, decreasing the risk of passing the infection to my developing baby.

I was immensely relieved when my test results were clear and showed no signs of infection. By using good common sense and following some standard precautions, I have been able to avoid any serious viral or bacterial infections. Being pregnant changed my view of the world, and it also sharpened my awareness of working safely in a hospital. I have now survived three pregnancies while working in a hospital and have three happy, healthy, and rambunctious boys.



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