Immunization Education: Everything You Need to Know About Vaccines Before and During Pregnancy

Melissa, pregnant for the first time, live chatted with MotherToBaby through our website: “Hi, I’m 29 weeks pregnant and wondering about vaccines. I have seen so many different things online and I am worried about getting really sick while I’m pregnant. Can you help?”

Melissa is not alone. Many people contact MotherToBaby to find the most up-to-date information about vaccines during pregnancy. Protecting yourself from circulating viruses can also help protect your developing baby. Infections such as influenza, pertussis, rubella, chicken pox, and COVID-19 can cause serious problems in both a pregnant woman and her developing baby. Let’s navigate through the current recommendations.

Plan to Receive Some Vaccines Prior to Pregnancy

You may have heard there are some vaccines, like measles, mumps, and rubella (MMR) and chickenpox (varicella), you should not receive during pregnancy. These “live” vaccines are avoided as they are made from viruses or bacteria that have been weakened, but not killed. Due to the small chance that a live vaccine might cause the disease itself, live vaccines are not routinely given to pregnant women.

So how can you protect yourself and your developing baby from viruses like measles, mumps, rubella (MMR) and chicken pox if it is not recommended (also known as contraindicated) to receive the vaccines during pregnancy? The Centers for Disease Control and Prevention (CDC) consider people who have received one or more doses of MMR vaccine during their lifetime to be protected for life. Adults who never got the MMR vaccine should get at least 1 dose (or 2 doses for some people at higher risk of infection) before pregnancy. Those who have never had chickenpox or received a chickenpox vaccine should get 2 doses of varicella vaccine, at least 4 weeks apart, before pregnancy. If you aren’t sure if you ever got vaccinated for MMR or chickenpox or unsure if you had chickenpox in the past, you can safely receive the necessary live vaccines before that positive pregnancy test! Out of an abundance of caution (small possibility of that infection) it is advised to wait at least one month before becoming pregnant after these vaccines. This is just one reason why it is beneficial to have a pre-pregnancy health checkup and to discuss any future conception plans with your provider!

Keep Up with Recommended Vaccines During Pregnancy and Encourage Others to Do So, Too

So, which vaccines should you receive during pregnancy?

CDC recommends all women who are pregnant receive the flu shot and updated COVID-19 vaccine each year, a Tdap

(tetanus diphtheria pertussis) vaccine in each pregnancy, and an RSV (respiratory syncytial virus) vaccine (if you have not received one in a previous pregnancy).These vaccines are not live vaccines and have not been associated with an increased chance for birth defects or pregnancy complications. (A nasal spray vaccine is also available against influenza, but it is a live vaccine and not recommended in pregnancy).

Influenza vaccine (flu shot)

The flu shot usually becomes available in September and is offered throughout flu season. CDC recommends **getting a flu shot by the end of October** despite flu seasons varying in their timing each year. This timing helps protect a pregnant woman before flu activity begins to increase. Protection begins about two weeks after you get the flu shot and lasts at least six to eight months. It is necessary to receive the seasonal flu shot each year to be protected in the current flu season. Getting vaccinated during your pregnancy may also help protect your baby from getting sick during the first 6 months of life! This is especially important because infants less than 6 months of age cannot receive the flu vaccine.

COVID-19 vaccine

It is well known that pregnant women are more likely to get very sick from COVID-19 compared to those who are not pregnant. This is why is so important to receive an updated COVID-19 vaccine every year, any time before or during pregnancy, for the best protection against severe illness. CDC recommends staying up-to-date with COVID-19 vaccines every year: https://www.cdc.gov/covid/vaccines/stay-up-to-date.html.

Tdap vaccine

“I just had a Tdap vaccine a couple years ago – so I don’t need another one, right?” Melissa asked a very common question we receive regarding the Tdap vaccine during pregnancy. Although this vaccine is recommended for adults every 10 years, for women who are pregnant, receiving the shot in the 3rd trimester (specifically 27-36 weeks gestation) can help the baby get as many of the mother’s antibodies as possible. After delivery, these antibodies provide some protection against pertussis, also known as whooping cough (a very contagious respiratory infection), until the baby can receive his/her own dTAP vaccine (starting at 2 months of age). Additionally, if everyone who lives with you and any caregivers get the vaccine, it can lower the chance for the baby to be exposed to pertussis.

RSV vaccine

The RSV vaccine protects both pregnant women and their babies from RSV, a virus that can cause serious breathing problems in babies. CDC recommends a single dose of the Abrysvo® RSV vaccine between 32 and 36 weeks of pregnancy, during the RSV season (September-January). As with the flu and Tdap vaccines, this maternal vaccine helps the pregnant woman create antibodies that can pass to the baby, giving the baby some protection from an RSV infection after birth. By getting this vaccine, pregnant women can help keep their newborns safe from serious health complications. Melissa, being 29 weeks, can now plan an upcoming RSV vaccine appointment!

Pregnant women who receive vaccines can also share their experiences with maternal health researchers, like MotherToBaby. Our studies are published in medical journals and product labels, and can help others like you when navigating vaccine decisions in pregnancy.

There are no Vaccines to Prevent Some Infections

Many people are packing their bags for a getaway during the summer months. If you are considering an upcoming vacation or babymoon, it's important to protect yourself from viruses and infections with the appropriate vaccines for that area. Where are you headed? Check with your healthcare provider regarding any specific travel vaccines you might need. CDC recommends discussing any travel plans with your provider at least 4-6 weeks before your trip. Contact MotherToBaby to check the information on any vaccines your healthcare provider recommends

Viruses like Zika, malaria, and Oropouche can be spread by mosquitos and biting flies (midges). These infections can increase serious risks in pregnancy. Since there are no vaccines to prevent these infections, the safest approach during pregnancy would be to not travel to areas with any possible level of risk. Should you choose to travel, it's important to protect yourself using the recommended insect repellents among other ways to help prevent bites while traveling.

Although Melissa didn't have any trips planned for the rest of her pregnancy, she was happy to know about these other infections she wasn't even thinking about!

Other Precautions

Although masks are no longer required in most public areas, this is still a great way to reduce the risk for infections while around others! Good hand washing is also the most simple and effective way to prevent the spreading of germs to keep you healthy.

After chatting with Melissa, she decided to make her appointment for her COVID-19 and Tdap vaccines (you can get them at the same time!) and will go in ASAP when the flu vaccine for this season is available. She felt reassured knowing she had decided to give herself and her developing baby the best protection from these illnesses as possible. "Thank you for all this info! I just want to make the best choice for me and my baby – I feel so much better."

Do you have questions about vaccines during pregnancy? Call, chat, text, or email MotherToBaby!

References:

https://mothertobaby.org/fact-sheets/vaccines-pregnancy/

https://mothertobaby.org/pregnancy-studies/

https://www.cdc.gov/vaccines/by-age

https://www.cdc.gov/vaccine-safety/about/pregnancy.html

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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Last year I was pregnant with my first child. At the same time, I was going through the immigration process to apply for permanent residency in the United States. I wasn't aware of the many things that you must do to get your health records cleared by immigration and how that process can be a great source of anxiety during pregnancy. If you are an immigrant, you may not have health insurance or cannot understand the language, which can be another challenge. In order to have sound and scientifically true advice during that critical period, I always consulted with my doctor and then MotherToBaby.

First, I was told that I needed to get revaccinated for certain diseases, even though I may have had them or may have been previously vaccinated in the past. Those vaccinations included measles, mumps and rubella (MMR), varicella, polio, tetanus diphtheria pertussis (Tdap), hepatitis B, and COVID-19. As soon as I heard this long list, I went online and checked the MotherToBaby facts sheets about those vaccines one by one to see what was known about their use in pregnancy. It turns out the Hepatitis B and COVID-19 vaccines are not associated with risk during pregnancy. Even more, it is recommended to get a Tdap vaccine during pregnancy to provide protective antibodies to your baby against pertussis (whopping cough). Live vaccines like MMR and varicella (chickenpox) are not recommended during pregnancy. Thankfully I was able to get bloodwork done to check antibody levels (protective proteins) showing prior protection. If you can show full protection, you no longer need to get vaccinated for these diseases after pregnancy.

One other thing I had to find out was my tuberculosis (TB) status. This is done by blood work, but if the results don't rule out the disease, you would need a lung x-ray. In general, X-rays are not recommended during pregnancy. However, if needed, studies show that a single chest x-ray is not associated with an increased risk for birth defects or pregnancy complications for the developing baby. It is important to know your tuberculosis status before pregnancy since active infection can be associated with preterm labor (early birth before 37 weeks), low birth weight of the baby, or even maternal death. Getting TB treated as soon as possible, even when you are pregnant, is so important. Tuberculosis is a slow-growing, pesky disease that is common in certain countries, including my home country, Turkey,

but not common in the United States. That is why it is important to get it checked during the immigration process to prevent spread.

In addition to making sure I was getting my immigration to-do list sorted out, I also had to contend with new feelings brought on by pregnancy, both happy and stressful ones. This included all day nausea, aka the morning sickness, I had lots and lots of morning sickness. My first instinct was to call my mom and ask for help. She gave me a recipe for a concoction that included turmeric, sage, ginger, and mistletoe. I made it and drank it a couple of times without thinking whether that might be safe during pregnancy since it was all natural and herbal. A few days later, I was talking with one of my best friends, who was pregnant as well, complaining about morning sickness and asking for suggestions that have helped her. She said she would not drink any herbal tea without checking with her doctor. Ding ding, after talking with her, I was terrified to research the topic, and when I did, it confirmed my worst fears. The mistletoe in my nausea drink might cause miscarriage if consumed in large amounts. Many of the other herbs hadn't been studied in pregnancy at all. I didn't consume any more of the morning sickness drink and am fortunate that I had a healthy term baby. Lesson learned!

As immigrants, we bring our full heritage with us and try to combine the best of both worlds. Those herbal remedies and recipes are our culture; however, pregnancy is a special and very vulnerable time period. Everybody should be cautious about what we put into our bodies, especially herbal remedies since they are mostly not well studied during pregnancy to show whether they are associated with risks to the baby or not. Even if they are studied, the production and harvesting are not regulated or controlled by the Food and Drug Administration (FDA), or other governmental agencies, and contaminations might happen. Better safe than sorry, right?

Carrying my baby through the immigration process and following my dreams along the way was challenging, but I learned on that road that it is important to question my customs and traditional medications when pregnant. Not everything my mother or grandmother did is safe and effective. Also, I was glad that MotherToBaby was there for me when I was going through the immigration process while pregnant to ask my burning questions about vaccinations and x-rays.

Anyone with questions about herbals, vaccines, TB testing, or any other exposure in pregnancy should know that MotherToBaby is a great resource. Call or chat today to get your individual questions answered by a teratogen information specialist so you can rest assured that you and your baby can have a healthy and well-informed entry into America.

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