

COVID-19 mRNA Vaccine (Moderna/Spikevax® and Pfizer/Comirnaty®)

This sheet is about exposure to the COVID-19 mRNA vaccine in pregnancy and while breastfeeding. This information is based on available published literature. It should not take the place of medical care and advice from your healthcare provider.

What is COVID-19?

COVID-19 (short for Coronavirus Disease 2019) is an illness caused by a virus (called SARS-CoV-2). The virus easily spreads from person to person through respiratory droplets that come from our mouths and noses when we breathe, talk, cough, or sneeze. For more information on COVID-19, please see the MotherToBaby fact sheet at https://mothertobaby.org/fact-sheets/covid-19/.

What is the COVID-19 mRNA vaccine?

The COVID-19 messenger RNA (mRNA) vaccine helps protect against the virus that causes COVID-19. It is often simply called a "COVID vaccine." Currently, mRNA is the most common type of vaccine used in the United States to protect against COVID-19. The vaccine is available under the names Moderna/Spikevax® and Pfizer/Comirnaty®. The mRNA vaccine does not contain live virus that could cause COVID-19. The vaccine is not 100% effective at preventing COVID-19, but can greatly lower the chance of getting very sick from the virus.

For more information on another kind of COVID-19 vaccine, please see the MotherToBaby fact sheet at https://mothertobaby.org/fact-sheets/covid-19-protein-subunit-vaccine/.

Is the COVID-19 mRNA vaccine recommended for people who are pregnant?

The Centers for Disease Control and Prevention (CDC) recommend that people who are pregnant, recently pregnant, planning a pregnancy, or could become pregnant in the future stay up to date with COVID-19 vaccines. A COVID-19 mRNA vaccine can be given at any time in pregnancy. Talk to your healthcare provider, contact a MotherToBaby specialist, or visit the CDC website to learn how to stay up to date with COVID-19 vaccines: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html.

Having a COVID-19 infection while pregnant increases the chance of severe illness and pregnancy complications. Studies have shown that people who are up to date with COVID-19 vaccines in pregnancy are less likely to get very sick or have pregnancy complications from a COVID-19 infection than people who are not up to date.

Can getting a COVID-19 mRNA vaccine make it harder for me to get pregnant or affect fertility treatments?

Some people have reported changes in their menstrual cycle (period) after getting a COVID-19 mRNA vaccine, such as having a slightly longer or heavier period or starting their next period sooner than expected. Studies have found that if these changes happen, they are temporary and do not affect the person's fertility.

The American Society for Reproductive Medicine (ASRM) recommends that people undergoing fertility treatment stay up to date with COVID-19 vaccines. Several studies of people undergoing in-vitro fertilization (IVF) found that getting a COVID-19 mRNA vaccine did not affect the function of the ovaries (the organ that releases the egg), number of oocytes (immature eggs), hormone levels, or success rates of embryo implantation. Another study found that people vaccinated

60 days or less before IVF experienced reduced rates of pregnancy. There is currently no recommendation to postpone fertility treatment after getting the vaccine or to avoid getting the vaccine after treatment.



I just got a COVID-19 mRNA vaccine. How long do I need to wait before I get pregnant?

There is no recommendation to wait before trying to get pregnant after getting a COVID-19 mRNA vaccine.

Does getting a COVID-19 mRNA vaccine increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Multiple studies have found that getting a COVID-19 mRNA vaccine during pregnancy does not increase the chance of miscarriage.

Does getting a COVID-19 mRNA vaccine increase the chance of birth defects?

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. The available studies have not found an increased chance for birth defects when a person receives a COVID-19 mRNA vaccine during the first trimester.

Fever is a possible side effect of getting a COVID-19 mRNA vaccine. A high fever in the first trimester can increase the chance of certain birth defects. Acetaminophen is usually recommended to reduce fever during pregnancy. For more information about fever and pregnancy, see the MotherToBaby fact sheet about fever/hyperthermia at https://mothertobaby.org/fact-sheets/hyperthermia-pregnancy/.

Does getting a COVID-19 mRNA vaccine in pregnancy increase the chance of other pregnancy-related problems?

Studies have found no increased chance for pregnancy-related problems or newborn complications such as stillbirth, preterm delivery (before 37 weeks of pregnancy), babies born smaller than expected, low Apgar scores, NICU admission, or neonatal death when a COVID-19 mRNA vaccine is given anytime during pregnancy.

Does getting a COVID-19 mRNA vaccine in pregnancy affect future behavior or learning for the child?

It will take time to follow the children of people who were vaccinated in pregnancy in order to answer this question. However, based on what is known about how mRNA vaccines work in the body, getting a COVID-19 mRNA vaccine is not expected to cause long-term problems for the child.

Does getting a COVID-19 mRNA vaccine during pregnancy protect the baby from the virus after delivery?

The antibodies that a person makes after getting a COVID-19 mRNA vaccine during pregnancy can pass to the developing baby. Studies have also shown that the infants of people who became up to date with COVID-19 vaccines during pregnancy have greater protection against COVID-19 after delivery and are less likely to be hospitalized with COVID-19.

Breastfeeding and the COVID-19 mRNA vaccine:

Small studies have found that mRNA from the Moderna/Spikevax® and Pfizer/Comirnaty® vaccines is unlikely to enter the breast milk. If any small amounts of vaccine ingredients did enter the breast milk, they would most likely be destroyed in the baby's stomach. Studies have not reported serious adverse reactions to the mRNA vaccine in people who are breastfeeding or their infants. Less than 10% of people have reported changes in milk supply (more or less milk) after getting a COVID-19 mRNA vaccine, but their supply returned to normal within a day or two.

Organizations including the Academy of Breastfeeding Medicine (ABM) and the American Academy of Pediatrics (AAP) agree that people who are breastfeeding can receive a COVID-19 mRNA vaccine. There is no recommendation to postpone breastfeeding or discard breast milk after getting a COVID-19 mRNA vaccine.

Antibodies against the virus that causes COVID-19 have been found in the breast milk of people who have received an mRNA vaccine. More research is needed to know how these antibodies might protect a breastfeeding child against the virus. Talk to your healthcare provider about all of your breastfeeding questions.

If a male gets a COVID-19 mRNA vaccine, could it affect fertility or increase the chance of birth defects?

Two studies found no differences in sperm production before and after getting a COVID-19 mRNA vaccine. In general, exposures that fathers or sperm donors have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at

https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/.



If you have received the Moderna or Pfizer vaccine in the last 3 months, you may be a good match for our COVID-19 mRNA vaccine study. Help us help other pregnant people. If you are interested in learning more about this study, please call 1-877-311-8972 or visit: https://mothertobaby.org/join-study/.

Please click here for references.

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

Disclaimer: MotherToBaby Fact Sheets are meant for general information purposes and should not replace the advice of your health care provider. MotherToBaby is a service of the non-profit Organization of Teratology Information Specialists (OTIS). OTIS/MotherToBaby encourages inclusive and person-centered language. While our name still contains a reference to mothers, we are updating our resources with more inclusive terms. Use of the term mother or maternal refers to a person who is pregnant. Use of the term father or paternal refers to a person who contributes sperm. Copyright by OTIS, October 13, 2023.