

COVID-19 Vaccines

* Information on COVID-19 vaccines is rapidly evolving, and this fact sheet could become outdated by the time you read it. For the most up to date information, please call MotherToBaby at 866-626-6847.

This sheet is about COVID-19 vaccines in pregnancy and while breastfeeding. This information 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 are COVID-19 vaccines?

COVID-19 vaccines help protect against the virus that causes COVID-19. Three different COVID-19 vaccines are currently approved for use in the United States: two messenger RNA (mRNA) vaccines (Moderna and Pfizer/Comirnaty®) and a viral vector vaccine (Johnson & Johnson/Janssen). None of these vaccines contains live virus that could cause COVID-19. You can learn more about how the different vaccines work here: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/how-they-work.html>.

COVID-19 vaccines help the body make protection (antibodies) against the virus that causes COVID-19. Over time, the protection provided by the vaccines starts to decrease. Getting a booster shot brings your protection back up. COVID-19 vaccines and boosters are not 100% effective at preventing infection, but can greatly reduce the chance of getting very sick from the virus. For further protection, people who are pregnant (and those who live with them) might consider continuing to wear masks in public, even if they are fully vaccinated.

Should people who are pregnant get a COVID-19 vaccine or booster shot?

Organizations including the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics, and the American College of Obstetricians and Gynecologists (ACOG) recommend that people who are pregnant, recently pregnant, planning a pregnancy, or may become pregnant in the future be fully vaccinated against COVID-19, including getting a booster shot when they are eligible. People ages 18 and older are eligible for a booster shot 6 months after getting the Moderna or Pfizer/Comirnaty® vaccines or 2 months after getting the J&J vaccine. The COVID-19 vaccines and booster shot can be given at any time in pregnancy. If you have questions about the vaccines and pregnancy, talk with your healthcare provider or contact a MotherToBaby specialist.

Is there anyone who shouldn't get a COVID-19 vaccine?

You should not get a COVID-19 vaccine if you have had a severe allergic reaction (anaphylaxis) or an immediate allergic reaction of any kind (within 4 hours) to a previous dose of the vaccine or any ingredient in the vaccine. If you have had a severe allergic reaction to any other vaccine or injection, talk to your healthcare provider about whether or not you should get a COVID-19 vaccine.

Does getting a COVID-19 vaccine make it harder to get pregnant?

There is no evidence that getting a COVID-19 vaccine makes it harder to get pregnant.

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

Since COVID-19 vaccines are not live vaccines, there is no recommendation to wait before trying to get pregnant. In addition, if someone becomes pregnant after getting the first dose of an mRNA vaccine, they should still receive the second dose on time as scheduled.

I am undergoing fertility treatment. Can I get a COVID-19 vaccine?

The American Society for Reproductive Medicine recommends that people undergoing fertility treatment get the

vaccine. Three small studies of couples undergoing in-vitro fertilization (IVF) found that getting a COVID-19 mRNA vaccine did not affect the function of the female partners' ovaries (the organ that releases the egg), number of oocytes (immature eggs), hormone levels, or success rates of embryo implantation.

There is no recommendation to postpone fertility treatment after getting the vaccine or to avoid getting the vaccine after treatment. However, people scheduled for procedures including oocyte retrieval, embryo transfer, and intrauterine insemination should avoid COVID-19 vaccination at least three days before and three days after their procedure. This is not because being vaccinated is known to be unsafe, but because having common side effects from the vaccine might make it harder to monitor the person during and after surgery (such as knowing if their symptoms are related to the vaccine or to possible infection related to the procedure).

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

Miscarriage can occur in any pregnancy. A study reported no increase in miscarriages among 2,456 people who received a COVID-19 mRNA vaccine before 20 weeks of pregnancy (when a miscarriage can happen). Another study looked at over 105,000 pregnancies and found that those who had miscarriages were no more likely to have gotten a COVID vaccine in the past month than those who did not have miscarriages.

Does getting a COVID-19 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. Based on what is known about these and other vaccines, getting a COVID-19 vaccine is not expected to increase the chance of birth defects.

Fever is a possible side effect of the COVID-19 vaccines. 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 vaccine increase the chance of other pregnancy complications?

Studies involving thousands of people who have given birth after getting COVID-19 vaccines in the second and third trimesters of pregnancy have not found increased risks for pregnancy complications such as stillbirth, preterm delivery (before 37 weeks of pregnancy), babies born smaller than expected, or neonatal death. The majority of people in published studies have gotten mRNA vaccines (Moderna or Pfizer/Comirnaty®). Pregnancy data is still limited for the Johnson & Johnson/Janssen viral vector vaccine.

Having a COVID-19 **infection** while pregnant increases the chance of severe illness and pregnancy complications such as stillbirth and preterm delivery. Being fully vaccinated against COVID-19 and getting a booster shot on time greatly reduces these chances.

Does getting a COVID-19 vaccine cause long-term problems in behavior or learning for the baby?

It will take time to follow the infants of people who were vaccinated in pregnancy in order to answer this question. However, based on what is known about these and other vaccines, getting a COVID-19 vaccine is not expected to cause long-term problems for the baby.

If I get a COVID-19 vaccine during pregnancy, will it protect my baby from the virus after delivery?

After getting a vaccine, our bodies make antibodies against the virus. These antibodies can pass to the baby during pregnancy. More research is needed to know how much these antibodies can protect the baby from the virus after delivery, how long that protection might last, and the best time in pregnancy to be vaccinated in order to pass more antibodies to the baby.

Breastfeeding and COVID-19 vaccines:

Organizations including the Academy of Breastfeeding Medicine and the American Academy of Pediatrics recommend that people who are breastfeeding be fully vaccinated against COVID-19 and get a booster shot when they are eligible.

Small studies have found that mRNA from the 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 vaccine in people who are breastfeeding or their infants. There is no

recommendation to postpone breastfeeding or discard breast milk after getting the vaccine.

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

I got the COVID-19 vaccine. Can it make it harder for me to get my partner pregnant 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 the risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at <https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/>.

MotherToBaby is currently conducting an observational study looking at certain COVID-19 vaccines in pregnancy. If you have been vaccinated against COVID-19 and are interested in taking part in this study, please call 1-877-311-8972 or sign up at <https://mothertobaby.org/join-study/>.

Please click [here](#) to view references.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://mothertobaby.org).

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