COVID-19

*Information on COVID-19 is rapidly evolving, and this fact sheet could become outdated by the time you read it.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 talks about COVID-19 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 is a respiratory illness caused by a virus. This virus (referred to as SARS-CoV-2) belongs to a group called coronaviruses. The most common symptoms of COVID-19 include fever, cough, and shortness of breath. Other symptoms may include chills with or without shaking, muscle pain, headache, sore throat, and a new loss of taste or smell. In more severe cases, infection can cause pneumonia, respiratory failure, and death. Some people have only mild symptoms or no symptoms at all (asymptomatic), but they can still spread the virus to other people.

The virus that causes COVID-19 is primarily spread by close person-to-person contact. When an infected person coughs, sneezes, or talks, the virus can spread to others who are nearby. The best ways to protect yourself from infection are to avoid close contact with others (stay at least 6 feet away), wash your hands frequently, avoid touching your eyes, nose, and mouth, and clean/disinfect frequently touched surfaces. Staying home as much as possible when the virus is spreading in the community can also reduce the chance of exposure to the virus. We can all help prevent the spread of the virus by wearing cloth face coverings when out in public. The Centers for Disease Control and Prevention (CDC) share additional considerations for pregnancy here. You can find the CDC travel health notices here.

Can I be tested for COVID-19?

CDC offers testing guidance for COVID-19 here. If you have symptoms of COVID-19, call your healthcare provider right away.

Can having COVID-19 make it harder for me to get pregnant?

Studies have not been done to see if having COVID-19 could make it harder to get pregnant.

Does having COVID-19 during pregnancy increase the chance for miscarriage?

Miscarriage can occur in any pregnancy. Studies have not been done to see if having COVID-19 during pregnancy could increase the chance of miscarriage.

Does having COVID-19 increase the chance of birth defects?

In every pregnancy, a woman starts out with a 3-5% chance of having a baby with a birth defect. This is called her background risk. There are no published studies on COVID-19 in pregnancy and birth defects.

A high fever in the first trimester can increase the chance of certain birth defects (see MotherToBaby’s fact sheet: https://mothertobaby.org/fact-sheets/hyperthermia-pregnancy/). If you get sick with COVID-19 or any other illness and develop a high fever, please speak with your healthcare provider as soon as possible to discuss the best way to lower it.

Does having COVID-19 cause other pregnancy complications?

There is limited information about COVID-19 and pregnancy. Pregnant women who have COVID-19 might have a higher chance of becoming very sick than women who are not pregnant. Recent data looking at COVID-19 infections among women in the U.S. suggest that pregnant women may have a higher chance of being admitted to intensive care and needing to be put on a ventilator (machine that helps you breathe) than non-pregnant women. For
these reasons, it is especially important for pregnant women to take precautions to avoid infection and to seek prompt management of any symptoms.

Having severe symptoms or complications from any illness might require pregnant women to deliver their babies sooner than expected. Preterm delivery (before 37 weeks) can be associated with long-term health problems for babies. Reports of women hospitalized with symptoms of COVID-19 during the second and third trimesters of pregnancy have included preterm deliveries, but it is not clear if these were due to the mother’s infection or other reasons.

**If a woman has COVID-19 while pregnant, can the virus pass to the baby during the pregnancy?**

In limited reports of infants born to women with COVID-19 illness around the time of delivery, most newborns have not had evidence of infection. However, a small number of newborns have tested positive for the virus soon after delivery. Although this suggests the possibility that the virus could pass from a mother to a baby during pregnancy, researchers need more information in order to confirm this, and to better understand all the possible effects of COVID-19 in pregnancy.

**Does having COVID-19 in pregnancy cause long-term problems in behavior or learning for the baby?**

There is not enough information to know about any long-term effects of COVID-19 in pregnancy.

**I am a pregnant healthcare worker. What precautions should I take to protect myself against COVID-19?**

Be sure your employer knows you are pregnant before you provide any direct patient care to a person with confirmed or suspected COVID-19. When possible, and depending on staffing, management should consider limiting your exposure to these patients. This is especially true if you perform procedures with a higher chance of coming into contact with a patient’s respiratory droplets.

All healthcare providers should follow both standard and transmission-based precautions when working with all patients. Recommended personal protective equipment (PPE) for lower risk procedures includes the use of a facemask and eye protection. Aerosol generating procedures (such as intubation) or certain surgical procedures pose a higher risk for transmission should the patient have COVID-19. Recommended PPE for this type of encounter includes a N95 respirator (or a facemask if respirators are unavailable), gown, gloves, and eye protection.

If you have been exposed to a patient with COVID-19 while not wearing the recommended PPE, but are asymptomatic, you should be excluded from work for 14 days. If you have suspected or confirmed COVID-19 after caring for a patient with COVID-19, please see CDC’s detailed return to work criteria.

The MotherToBaby fact sheet Reproductive Hazards of the Workplace can answer additional questions.

**Can I breastfeed if I have COVID-19?**

Breast milk provides protection against serious childhood infections. Women are often encouraged to continue breastfeeding or providing breast milk even when they are sick with a virus, such as the flu. Particles of the virus that causes COVID-19 have been found in only a small number of breast milk samples from women with the virus. There have not been any reported cases of infants getting COVID-19 through breastfeeding. Based on current information, experts believe that the benefits of breastfeeding outweigh any potential risks of COVID-19 infection through the breast milk.

Women who are breastfeeding while sick with COVID-19 can help prevent passing the virus to their babies by washing their hands frequently and wearing a facemask while nursing. They can also consider pumping milk for someone else to feed their baby while they recover, especially if their illness requires them to be separated from their infant after delivery or at any other time. CDC information on COVID-19 and breastfeeding can be found here. The Academy of Breastfeeding Medicine statement on breastfeeding and COVID-19 can be found here. Be sure to talk to your healthcare provider about all your breastfeeding questions.

**If a man has COVID-19, could it affect his fertility (ability to get partner pregnant) or increase the chance of birth defects?**

This has not been studied. In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet on Paternal Exposures and Pregnancy at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.
and while breastfeeding. If you know or suspect you may have COVID-19 and you 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.