Seasonal Influenza (the Flu)

This sheet talks about exposure to seasonal influenza in a pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

What is influenza?
Influenza is an infection of the respiratory (breathing) tract. It is often called the flu. The symptoms of influenza are fever, headache, chills, muscle aches, coughing, congestion, runny nose, and sore throat. Influenza sometimes causes vomiting and diarrhea.

The typical flu season is from October through May of each year, and usually has the most activity between December and February. The types (strains) of viruses that cause seasonal influenza can change each year. Starting during the 2009-2010 flu season, people got sick from both seasonal influenza viruses and a new type of virus called H1N1.

Is influenza contagious? How does the virus spread?
Yes, influenza is contagious. The virus is spread through contact with respiratory droplets from the nose and mouth of infected individuals. When people cough, sneeze, or talk droplets containing the virus are spread through the air. They will travel a few feet from the person, then the droplets will fall and land on surfaces, such as tables and toys.

The time between exposure and the onset of symptoms (incubation period) is from 1 to 4 days. People with flu are most contagious in the first 3 to 4 days after their illness starts. A person with the flu can be contagious for up to 1 week.

Can having influenza during pregnancy put my health at risk?
Yes. When you are pregnant your body has a harder time fighting infections. Pregnant women have an increased chance of developing serious complications from the flu, such as respiratory distress (severe breathing problems).

Does having the flu increase the chance of miscarriage?
Miscarriage can occur in any pregnancy. Studies have not associated the flu with a higher chance of miscarriage. A high fever has been associated in some studies with a higher chance of miscarriage.

Can having influenza during pregnancy cause birth defects or put my baby at risk?
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. The influenza virus itself has not been shown to cause birth defects. However, having a high fever during early pregnancy might increase the chance for birth defects. Fever during pregnancy should be treated. Acetaminophen is the drug of choice for reducing fever during pregnancy. Tylenol® is one brand of acetaminophen. MotherToBaby has fact sheets on hyperthermia (fever) and acetaminophen at https://mothertobaby.org/fact-sheets/hyperthermia-pregnancy/pdf/ and https://mothertobaby.org/fact-sheets/acetaminophen-pregnancy/pdf/.

The most important thing you can do for yourself and your baby is to get the injected seasonal influenza vaccine, also known as the flu shot. Because pregnant women are at an increased chance for complications from
influenza, women who are pregnant (whether in their first, second, or third trimester), or planning to become pregnant, should get the seasonal flu shot.

A nasal-spray influenza vaccine (FluMist®) is also available. This vaccine contains a live but weakened virus. The nasal-spray influenza vaccine is not recommended during pregnancy. For more information about the flu vaccines during pregnancy, see the MotherToBaby fact sheet on the Seasonal Influenza Vaccine (Flu Shot) at https://mothertobaby.org/fact-sheets/seasonal-influenza-vaccine-flu-shot-pregnancy/pdf/.

In addition to getting the flu shot, be sure that you and others around you are doing the following to help prevent spread of the flu:

- Wash your hands with soap and water, or use an alcohol-based hand sanitizer often
- Do not touch your eyes, nose, or mouth
- Try to avoid close contact with sick people
- Cover your nose and mouth when you cough or sneeze and ask those around you to do the same.

**What should I do if I get sick?**

If you have flu-like symptoms, call your healthcare provider right away. Your healthcare provider may recommend antiviral medications to lessen the symptoms of the flu and to reduce the chance of serious illness. The Centers for Disease Control and Prevention (CDC) states that antivirals can be used in pregnant women even before confirmation of flu is made by a laboratory. These medications work best if taken early in the course of the illness. Your healthcare provider can help you decide whether taking an antiviral medication for flu prevention is appropriate for you. For more information about antiviral medications, see the MotherToBaby fact sheet Antiviral Medications to Treat/Prevent Influenza during Pregnancy at https://mothertobaby.org/fact-sheets/antiviral-medications-treat-prevent-influenza-the-flu-pregnancy/pdf/. If you are sick, stay home and avoid close contact with others to prevent passing the illness to other people. Drink plenty of fluids. Fever can be treated with acetaminophen.

**Should I talk to my health care provider if one of my family members is sick?**

Yes. Talk with your healthcare provider if you have been in close contact with anyone who has the flu.

**Should I stop breastfeeding if I have the flu?**

No. There are antibodies in your breast milk that may help prevent your baby from getting sick. It is important to try to protect your baby from getting sick. Wash your hands with soap and water before holding your baby. Avoid coughing or sneezing on your baby. Consider wearing a mask over your nose and mouth while feeding and caring for your baby to help prevent you passing the illness to your baby. While you are ill, you may want to consider having a someone who is not sick help you care for your baby.

Children younger than 6 months are at high risk of serious flu complications, but are too young to get a flu vaccine. If you think your baby has symptoms of the flu, contact your child’s healthcare provider, especially if your child is younger than 6 months old. If your baby has the flu, it is especially important to breastfeed as often as possible. Your baby will need extra fluids during this time. Also, antibodies in your milk help your baby fight the infection and get better faster. Be sure to talk to your healthcare provider about all your breastfeeding questions.

Please click here for references.

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[If you have questions about the information on this fact sheet or other exposures during pregnancy and breastfeeding, call MotherToBaby at (866) 626-6847. Copyright by OTIS.]