SARS-CoV-2 Infection and COVID-19 Vaccination In Lactating Individuals

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SARS-CoV-2 Infection In Lactating Women





Background

- In December 2019, a disease outbreak, characterized by fever respiratory symptoms originated in China.
 - The pathogen was later identified as SARS-CoV-2 and the disease it causes was named COVID-19
- The United States reported it's first laboratory-confirmed case in Washington State in January 2020.
- Very little was known about the risk of spreading the illness through breastfeeding
- Early care reports from 24 SARS-CoV-2-infected women total
 - Detected viral RNA in ten breastmilk samples from four women.
 - In some but not all cases, environmental contamination as the source of the virus or retrograde flow from an infected infant could not be ruled out





SARS-COV-2 INFECTION IN LACTATION

- Mommy's Milk protocol was modified in March 2020, to capture COVID-19 symptoms, testing, treatment from all enrolled mothers, and to specifically recruit exposed, symptomatic, high risk
- As of June 2022, HMB has enrolled 650 lactating women across U.S. who met criteria
 - Tested positive
 - Symptomatic, not tested
 - Symptomatic, tested negative
 - High risk exposure, asymptomatic/not tested





Study Aims

• To examine the frequency and state of SARS-CoV-2 in the breast milk of women with recently documented infection





SARS-COV-2 INFECTION IN LACTATION

Research Letter

August 19, 2020

Evaluation for SARS-CoV-2 in Breast Milk From 18 Infected Women

Christina Chambers, PhD, MPH¹; Paul Krogstad, MD²; Kerri Bertrand, MPH¹; <u>et al</u>

» Author Affiliations | Article Information

JAMA. Published online August 19, 2020. doi:10.1001/jama.2020.15580





Breastmilk Sampling Relative to Time of Woman's Positive SARS-CoV-2 Test

Filled and unfilled boxes indicate breastmilk samples that were collected when the woman was symptomatic and asymptomatic, respectively. All samples were tested for SARS-CoV-2 viral RNA by RT-PCR for infectivity. The sample highlighted by asterisk tested positive by RT-PCR, but negative by infectivity assay.



UC San Diego SCHOOL OF MEDICINE Chambers CD et al, JAMA. 2020 Oct 6;324(13):1347-1348.

SARS-COV-2 INFECTION IN LACTATION

No infectious SARS-CoV-2 in breast milk from a cohort of 110 lactating women

Paul Krogstad ^I, <u>Deisy Contreras</u>, <u>Hwee Ng</u>, <u>Nicole Tobin</u>, <u>Christina D. Chambers</u>, <u>Kerri Bertrand</u>, <u>Lars</u> <u>Bode</u> & <u>Grace M. Aldrovandi</u>

Pediatric Research (2022) Cite this article

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Findings In a total study group of 110 women, SARS-CoV-2 RNA was detected in milk from 6 of 65 women (9.2%) with recent confirmed infection. Neither infectious virus nor subgenomic RNA (a marker of virus infectivity) were detected in any of the samples.



Krogstad P et al, Pediatric Research, 2021; DOI: 10.1038/s41390-021-01902-y

CONCLUSIONS

- SARS-CoV-2 RNA can be found infrequently in the breastmilk after recent infection
- We found no evidence that breastmilk contains an infectious virus or that breastfeeding represents a risk factor for transmission of infection to infants.





COVID-19 Vaccination In Lactating Women





Background



- In December 2020, two novel mRNA vaccines for SARS-CoV-2 received emergency use authorization from the FDA
 - Pfizer-BioNTech
 - Moderna
- Early clinical trial data demonstrated the vaccines ability to prevent infection and severe disease
- Breastfeeding women were excluded from the early trials
 - This led to many questions from healthcare providers and lactating women on the safety of the vaccines in this special population and their breastfed infants



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Deployment of the Pfizer-BioNTech and Moderna mRNA Vaccines

The Advisory Committee on Immunization Practices' Updated Interim Recommendation for Allocation of COVID-19 Vaccine — United States, December 2020

Weekly / January 1, 2021 / 69(5152);1657-1660

On December 22, 2020, this report was posted online as an MMWR Early Release.

Kathleen Dooling, MD¹; Mona Marin, MD¹; Megan Wallace, DrPH^{1,2}; Nancy McClung, PhD¹; Mary Chamberland, MD^{1,3}; Grace M. Lee, MD⁴; H. Keipp Talbot, MD⁵; José R. Romero, MD⁶; Beth P. Bell, MD⁷; Sara E. Oliver, MD¹ (<u>View author affiliations</u>)

View suggested citation

Summary

What is already known about this topic?

On December 1, the Advisory Committee on Immunization Practices (ACIP) recommended that health care personnel and long-term care facility residents be offered COVID-19 vaccination first (Phase 1a).

What is added by this report?

On December 20, ACIP updated interim vaccine allocation recommendations. In Phase 1b, COVID-19 vaccine should be offered to persons aged ≥75 years and non-health care frontline essential workers, and in Phase 1c, to persons aged 65–74 years, persons aged 16–64 years with high-risk medical conditions, and essential workers not included in Phase 1b.

What are the implications for public health practice?

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Federal, state, and local jurisdictions should use this guidance for COVID-19 vaccination program planning and implementation.



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Early Data from Lactation Studies

- Gray et al. → 31 breastfeeding women in the United States who received an mRNA vaccine
 - >60% reported vaccine-related side effects
 - No data on infant outcomes or impact of breastfeeding (milk supply, color changes, etc.)
- Perl et al. → 84 breastfeeding women in Israel who received the Pfizer-BioNTech vaccine
 - Reported similar frequencies of vaccine-related symptoms after both Dose 1 and Dose 2
 - This study did not report any infant adverse events following maternal COVID-19 vaccination





Early Data from Lactation Studies

- McLaurin-Jiang et al. → 4,455 breastfeeding women were enrolled in the United States who received one or more doses of either mRNA vaccine (Pfizer-BioNTech or Moderna) ≥2 days before the online survey were enrolled into the study through the InfantRisk Center, Facebook and Twitter
 - Injection site pain, fatigue, headache, muscle pain, chills and fever were significantly more common after the second dose for both vaccine brands
 - 303 (7.1%) of breastfed children had one or more symptoms following maternal vaccination
 - Mothers who received their 2nd dose were more likely to report increase fussiness in their breast child (2.8% versus 13.9%, p<0.05)





COVID-19 VACCINATION IN LACTATION

- Mommy's Milk protocol was modified in December 2020, to capture COVID-19 vaccine dates, maternal and infant vaccine-related symptoms and any changes in milk supply from all enrolled mothers, and to specifically recruit for exposure to the vaccine
- As of June 2022, HMB has enrolled 700 lactating women across U.S. who were vaccinated or booster with a Pfizer, Moderna or Johnson & Johnson COVID-19 vaccine





Breastfeeding Medicine, Vol. 16, No. 9 | Clinical Research

Full Access

Maternal and Child Outcomes Reported by Breastfeeding Women Following Messenger RNA COVID-19 Vaccination

Kerri Bertrand 🖂, Gordon Honerkamp-Smith, and Christina D. Chambers

Published Online: 16 Sep 2021 | https://doi.org/10.1089/bfm.2021.0169





Study Aims

• To evaluate a larger sample of vaccinated breastfeeding women for vaccine-related symptoms and their breastfed children for any non-serious and serious adverse events





Symptom

Any maternal symptoms Any local symptoms Pain at injection site Redness at injection site Swelling at injection site Itching at injection site Any systemic symptoms Chills Headache Joint pain Muscle/body aches Fatigue or tiredness Fever Nausea Vomiting Diarrhea Abdominal pain Rash (body) Other Change in milk supply More milk Less milk Change in milk color Child events Drowsiness

Child events Drowsiness Sedation Poor feeding Rash Bruising/bleeding Constipation Diarrhea Stools w/abnormal color Fever Low body temp Restlessness Irritability Poor sleep High-pitched crying Abnormal movements Abnormal skin color

Study Design

- Breastfeeding women residing in the United States who received both doses of either mRNA vaccine (Pfizer-BioNTech or Moderna) were enrolled into Mommy's Milk
- Participants completed a semi-structured telephone interview and questionnaire
 - Demographics, personal and family health history, child health history, breastfeeding habits, COVID-19 history, vaccine brand and maternal and child symptoms for 7 days following both doses of the vaccine
- Maternal and child characteristics and outcomes were compared by brand of vaccine for each dose using Student's t test for continuous and Fisher's exact test for categorical variables using R



Mommy's Milk

Study Results

- Between December 14, 2020 through February 1, 2021, 180 women who received both doses of either mRNA vaccine were enrolled
- 128 (71.1%) of women received both doses of the Pfizer-BioNTech vaccine and 52 (28.9%) of women received both doses of the Moderna vaccine
- Child age at enrollment averaged 7.47 months (SD 5.44, range 0.09-27.45 months)
- 26.5% of children were exclusively breastfed (no formula supplementation or solid foods)
- 45.9% of children were breastfed 8 or more times per day





Study Results- Maternal Vaccine-Related Symptoms

- Dose 1
 - Similar proportions of women reported any vaccine symptom by brand (89.4% Pfizer; 98.1% Moderna)
 - Frequency by specific symptom did not differ between brands
- Dose 2
 - Women who received Moderna were significantly more likely to report both local (pain, redness, swelling or itching at the injection site) and systemic symptoms (chills, muscle/body aches, fever, and vomiting) compared to those who received Pfizer
 - All p's <0.05
 - Women who received Moderna were also significantly more likely to report a reduction in milk supply compared to those who received Pfizer
 - 8.0% versus 23.4%





Study Results- Infant Outcomes

- Infant Outcomes
 - Few events were reported with either brand or dose
 - None were serious adverse events
 - The most common events following Dose 2 were:
 - Irritability
 - Poor sleep
 - Drowsiness*

*Significantly more infants breastfed by women who received Moderna were reported to have this symptom (6.4% vs. 0%; p=0.02)





Study Limitations

• Symptoms were captured by self-report

• Volunteer sample which might not be generalizable to the population





Study Conclusions

- Breastfeeding women reported vaccine-related symptoms at similar frequencies to those previously reported
- Few non-serious events were reported in the breastfed children
- No serious adverse events were noted in the breastfed children

→These data are reassuring regarding the safety of vaccination in breastfeeding women





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TO LEARN MORE







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

https://MommysMilkResearch.org/

https://BetterBeginnings.org/



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