



Ask the Doctors:

What we have learned
about COVID

Vaccinations for Pregnant
Women and Children

December 15, 2021

RR-VHV Resources

Institute
for the Advancement of
Family Support Professionals

Your Dashboard All Modules Your Compass Hi Red

RAPID RESPONSE VIRTUAL HOME VISITING

Resources
Frequently asked questions

Want to help?
If you would like to support our efforts,
please let us know!
[Contact the RR-VHV for more information](#)

Guiding Principles

Accessible:

- All materials will be provided free of charge and made available to providers through the website and other platforms.
- All information and resources shared will be designed to meet the needs of all home visiting professionals.
- All materials developed as a result of this project will remain available to support future needs of the field.

Strength-based:

- Initiatives will be provider-led, responsible, and foster empowerment and growth.
- All providers (beginning and experienced) will be invited to share their expertise and content with the field.
- Every effort will be made to be as inclusive as possible. However, it is important to remember that we are individual or organizationally expected to have unique needs and capacities. Please extend our best wishes of strength and capacity to determine those areas in which you believe it is most important to be involved.

Shared Responsibility:

- The RR-VHV will create a streamlined process for information gathering and sharing that is inclusive of all providers.
- It will be the responsibility of each provider to actively participate in the most effective way for solutions to be developed and shared.
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Available Webinars

Home Visiting Models and COVID-19 Response
Friday, April 3, 2020
If you are having difficulty accessing this webinar, click here to download the video.
Learn how HRSA and national home visiting models are responding to the COVID-19 crisis. The discussion will address needs and priorities from the field, model guidance, resources available to support current efforts and responses from federal, state and local levels.

Virtual Visit Readiness
Learn the basics of using different types of technology to connect with families.
Available Resources:
Readiness (Infraction) (pdf)
Troubleshooting Tips (pdf)

Webinar recordings, slide decks, and supporting documents are available at:

<https://institutefsp.org/covid-19-rapid-response>



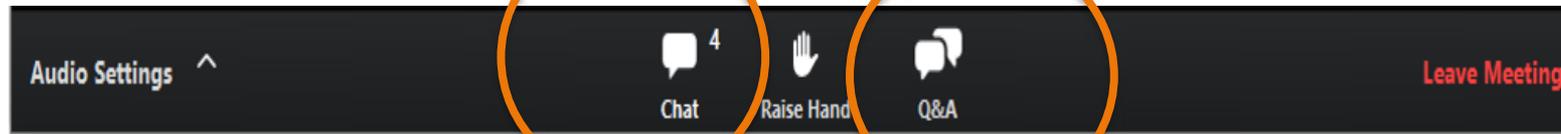
Chat Feature

Q&A Feature

Please use the chat box to respond to questions that we ask you!

Please use the Q&A box to submit your questions.

Thank you!



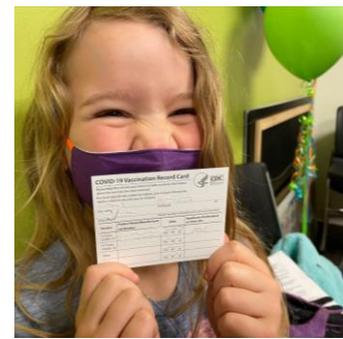


Dr. Mishelle Nace
Pediatrician
Foundation Health Partners
State of Alaska



Dr. Torri Metz
Associate Professor of Obstetrics and
Gynecology; Vice Chair, Research of
Obstetrics and Gynecology
University of Utah





Pediatric COVID-19 Vaccine Update

Dr. Mishelle Nace

Staff Physician, State of Alaska

December 15, 2021



COVID-19 vaccines: key points

COVID-19 vaccines are effective:

COVID-19 vaccines protect against death or hospitalization caused by COVID-19.

COVID-19 vaccines are safe:

Millions of people in the United States have received COVID-19 vaccines under intense safety monitoring.

Vaccines provide individual and community protection:

Vaccines will help end the pandemic by immunizing enough Alaskans so we can live life like before COVID-19.

Everyone age 5 years or older is now eligible for a free COVID-19 vaccine:

- Pfizer pediatric, age 5-11, 2 doses
- Pfizer age 12+, 2 doses
- Moderna, age 18+, 2 doses
- Johnson & Johnson, age 18+, 1 dose

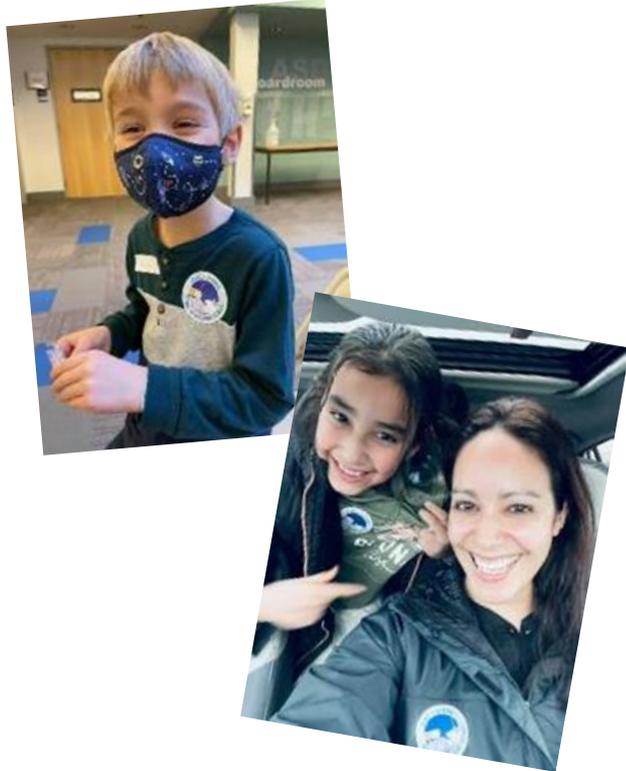


COVID-19 vaccination is recommended for everyone 5 years and older. Learn more about protecting your child at [cdc.gov](https://www.cdc.gov)

www.cdc.gov



Pediatric COVID-19 vaccine available for children ages 5-11



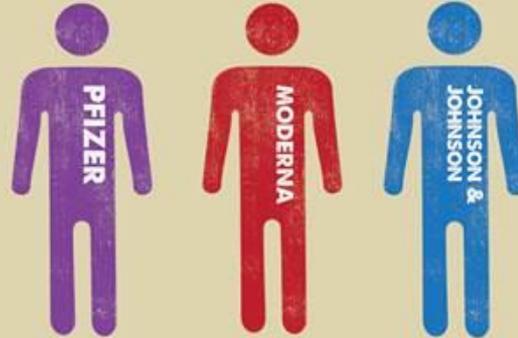
- COVID-19 vaccines are now available for kids ages 5-11.
- Slightly different pediatric formulation with a different buffer and lower dose (10 mcg) for ages 5-11.
- Call helpline at 1-800-232-0233, text your zip code to 438829, or visit [vaccines.gov](https://www.vaccines.gov) to find COVID-19 vaccine near you.
- If you have questions, talk with your child's health care provider.
- Make it a family event: Parents eligible for COVID-19 boosters may want to get their booster shot while their child receives their COVID-19 vaccine.



Everyone Age 16+ is now eligible for a COVID-19 Booster

Boosters are now authorized for all COVID-19 vaccines for anyone 16+ with mixed dosing allowed for 18+

Learn more at covidvax.alaska.gov



Initial vaccine received	Pfizer	Moderna	J&J
When to get a booster	6 months after completion of second dose	6 months after completion of second dose	2 months after completion of single dose
Who is eligible	Anyone 16 years or older who has completed the two-dose series	Anyone 18 years or older who has completed the two-dose series	Anyone 18 years or older who has received a single dose
Booster Options	Pfizer, Moderna or J&J for 18+ Pfizer only for ages 16 & 17	Moderna or Pfizer or J&J	J&J or Pfizer or Moderna



What is mRNA

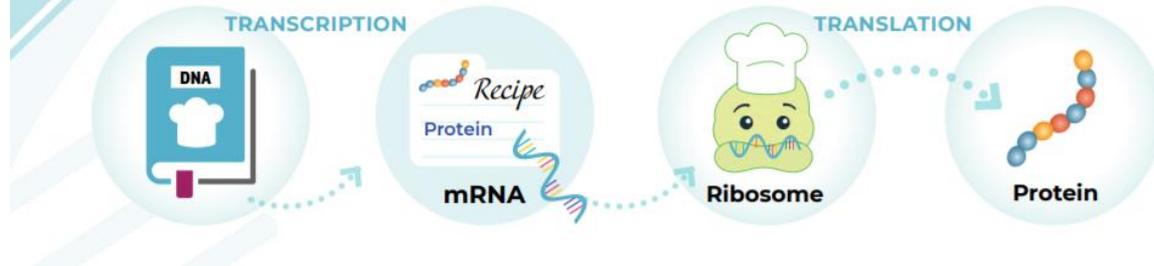


What is mRNA?

Messenger ribonucleic acid (mRNA)
is a critical part of human biology

Your body is using millions of tiny proteins for its regular functions right now, just to stay alive and healthy. And while your DNA plays a role, messenger RNA (mRNA) might just be the MVP.

PROTEIN SYNTHESIS



How mRNA COVID-19 Vaccines Work

Understanding the virus that causes COVID-19.

Coronaviruses, like the one that causes COVID-19, are named for the crown-like spikes on their surface, called **spike proteins**. These **spike proteins** are ideal targets for vaccines.

What is mRNA?

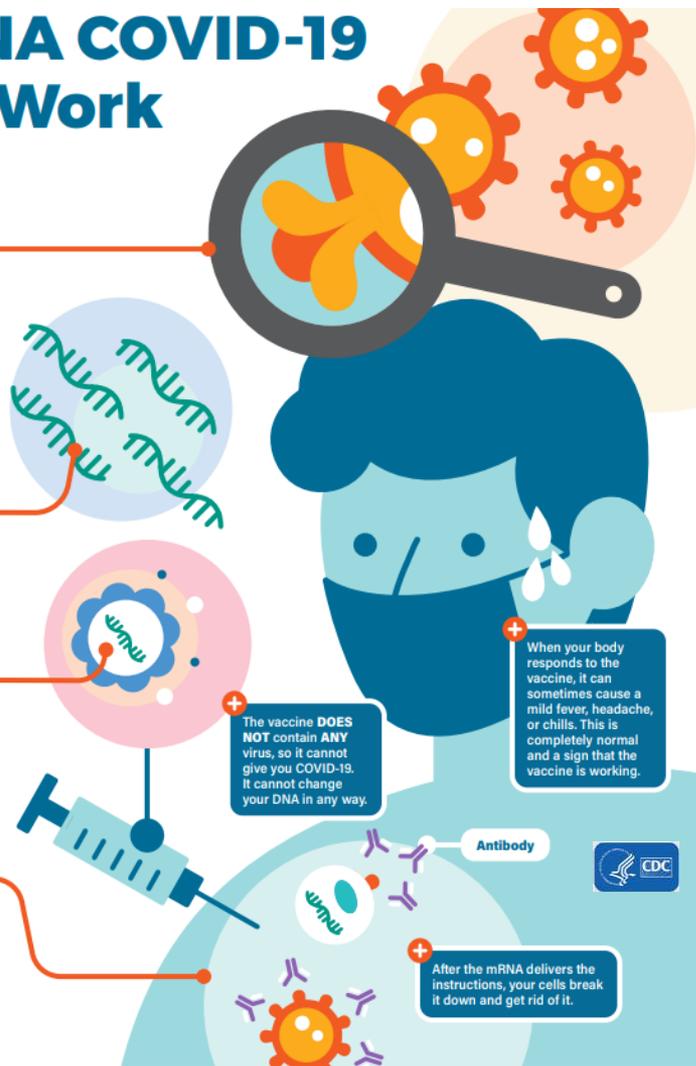
Messenger RNA, or mRNA, is genetic material that tells your body how to make proteins.

What is in the vaccine?

The vaccine is made of mRNA wrapped in a coating that makes delivery easy and keeps the body from damaging it.

How does the vaccine work?

The mRNA in the vaccine teaches your cells how to make copies of the **spike protein**. If you are exposed to the real virus later, your body will recognize it and know how to fight it off.

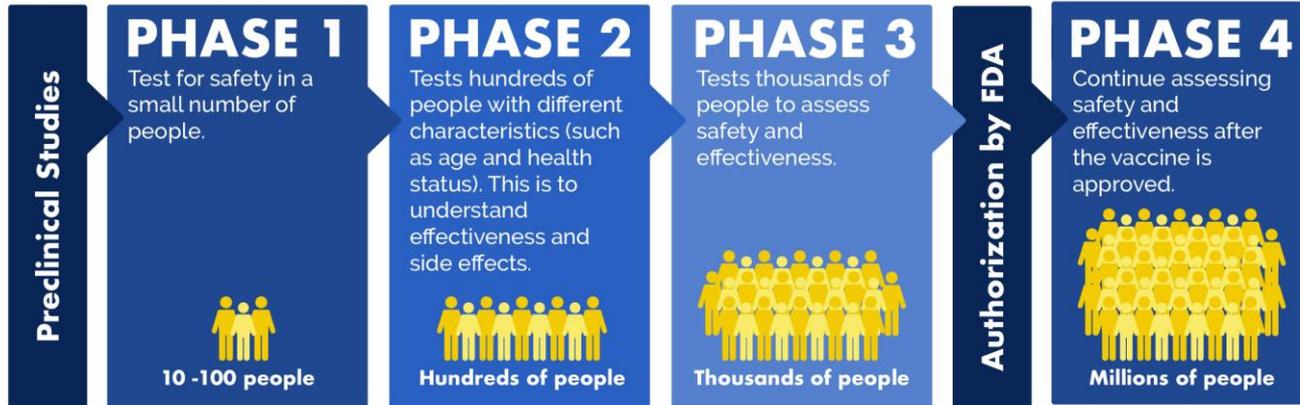


Vaccines are safe

Any vaccines authorized by the FDA for emergency use undergo a rigorous and transparent process. No steps were skipped.

COVID-19 VACCINE TRIALS

Any vaccine we receive will have been authorized by the U.S. Food and Drug Administration and will have completed:



How were vaccines developed so fast?

We cut red tape and administrative bureaucracy, not corners on safety. Here's how:



We already had helpful information about coronaviruses, so we weren't starting from scratch.



The U.S. and other governments **invested a lot of money** to support vaccine companies with their work.



A lot of people participated in clinical trials and **we didn't need to spend time finding volunteers**.



Manufacturing happened **at the same time as safety studies**, so vaccines were ready to be distributed once they were approved.



Ongoing safety checks

- Nearly 485 million doses of COVID-19 vaccine have been administered in the United States as of December 13, 2021. More than 72% of Americans have received at least one dose, and over 76% of those age 5 or older.
- Over 66% of Alaskans (age 5 or older) have received at least one dose of COVID-19 vaccine as of December 12, 2021.



VAERS



General side effects

It is normal to experience mild side effects 1-2 days after vaccination. Your medical provider can recommend over the counter options to address pain or discomfort you may experience *after* getting a vaccine.

The infographic features nine circular icons arranged in two rows. The top row contains five icons: a person holding their arm in pain, a red, swollen arm, a person with a swollen arm, a person lying in bed, and a person holding their head. The bottom row contains four icons: a person with a fever, a person with muscle pain, a person with a fever, and a person with nausea. Each icon is accompanied by a text label below it.

Pain Redness Swelling Tiredness Headache

Chills Muscle Pain Fever Nausea

 [cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

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Allergic reactions are rare and treatable

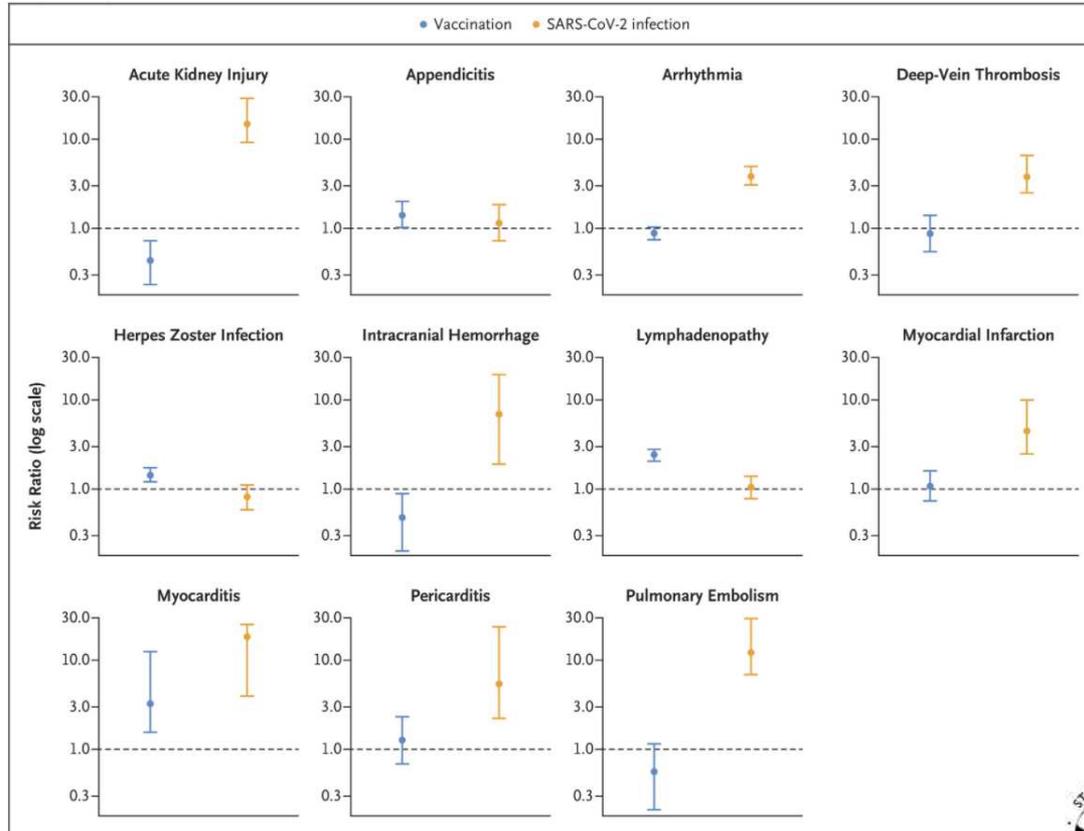


- Allergic reactions are rare (2 to 5 cases of anaphylaxis per million doses).
- Vaccinators are trained to respond to rare allergic reactions.
- You will be asked to wait 15-30 minutes after vaccination to ensure you don't have an allergic reaction.
- You should **not** get the COVID-19 vaccines if you have a history of severe allergic reaction to any ingredient in the vaccine.
- People with severe allergies to polyethylene glycol or a similar ingredient, polysorbate, should not get an mRNA vaccine.
- People who have reactions to an mRNA vaccine can get the J&J vaccine.



Safety of the Pfizer mRNA Vaccine

Risks for Adverse Events after Vaccination or SARS-CoV-2 Infection



Fertility, Pregnancy, and Breastfeeding



PREGNANT PEOPLE with symptomatic COVID-19 have a **70% INCREASED RISK OF DEATH.**

ONLY **31%** of pregnant people have been vaccinated against COVID-19

COVID-19 during pregnancy increases the risk for adverse pregnancy and neonatal outcomes, including preterm birth and admission of the baby to an intensive care unit.

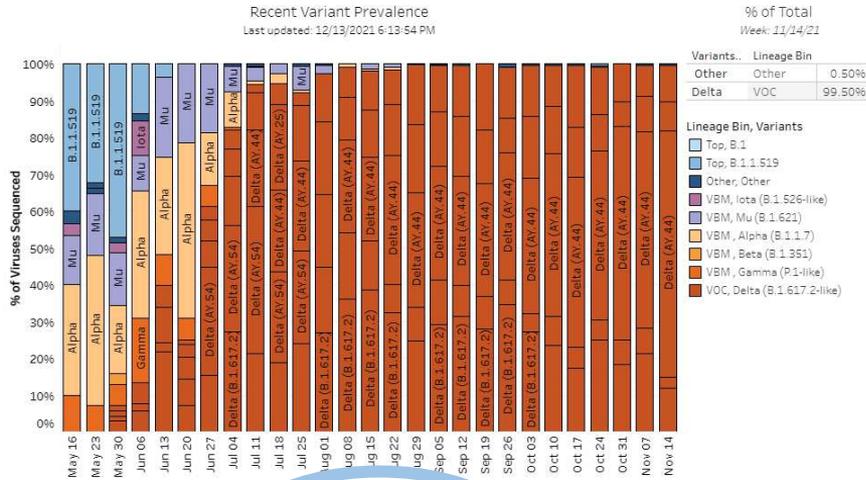
<https://emergency.cdc.gov/han/2021/han00453.asp>



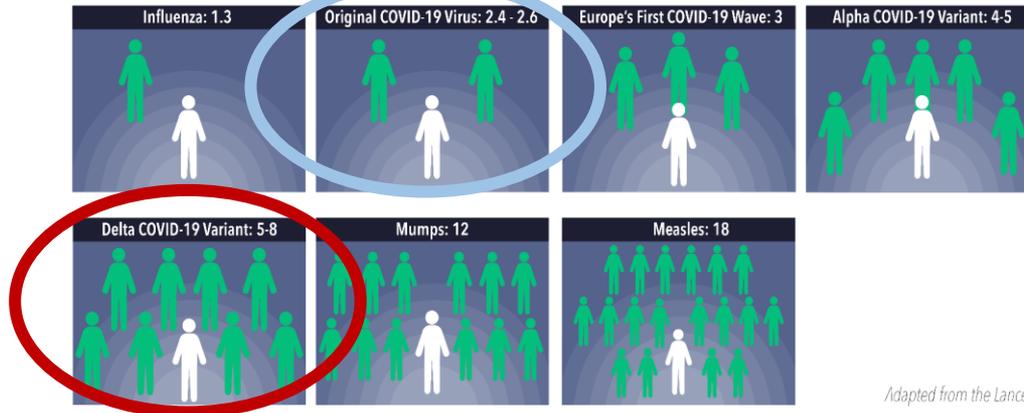
- [On 9/29/21 CDC issued an urgent health advisory strongly recommending vaccination before, during, or following recent pregnancy](#)
- COVID vaccination is recommended by the CDC, ACOG, and AAP for those who are pregnant, trying to become pregnant, or are breastfeeding.
- More than 178,000 pregnant women in the US have chosen to be vaccinated for COVID-19 and are registered for V-Safe safety monitoring as of 12/6/21.
- There is no evidence that fertility problems for men or women are a side effect from COVID-19 vaccines.



Delta Variant



- Viruses constantly change through mutation. Slightly different forms of a virus are called variants.
- Delta is a highly transmissible variant of the virus that causes COVID-19.



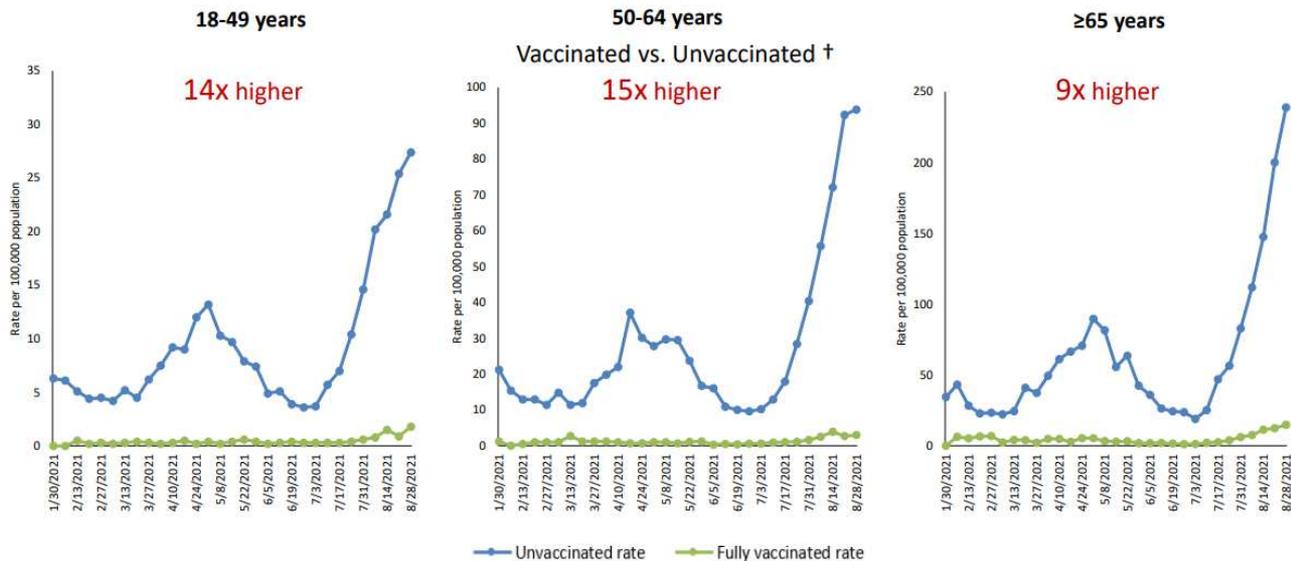
The R_0 (reproductive number) indicates how many people on average will contract an infectious disease from a single person. The more contagious the disease, the higher the R_0 .

Adapted from the Lancet



Hospitalization Rates by age group Vaccinated vs. Unvaccinated

Age-adjusted weekly COVID-19-associated hospitalization rates among adults by week of admission and age group* — COVID-NET, January 24–August 28, 2021



*Data are preliminary and case counts and rates for recent hospital admissions are subject to lag. As data are received each week, prior case counts and rates are updated accordingly.

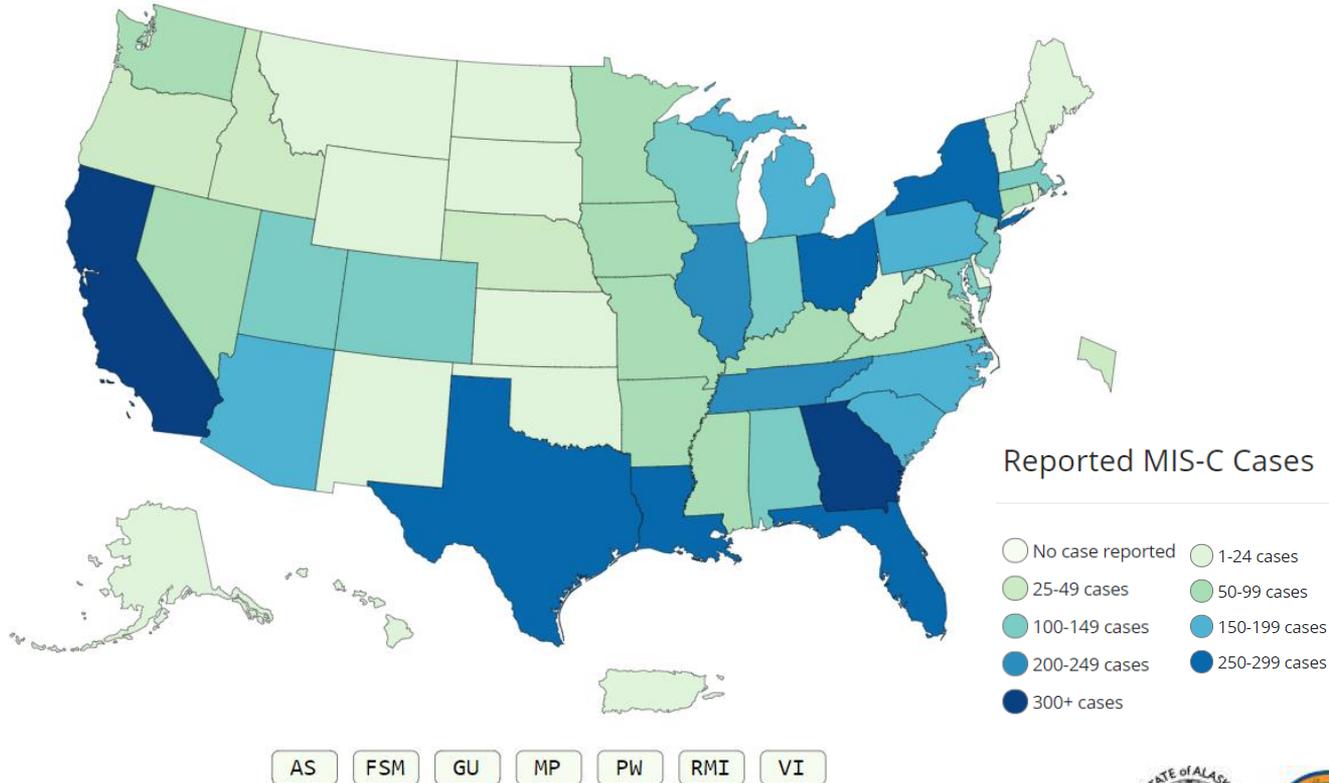
†Cumulative rate ratio from January 24 – August 28, 2021.

COVID Data Tracker: <https://covid.cdc.gov/covid-data-tracker/#covidnet-hospitalizations-vaccination>



Reported MIS-C Case by Jurisdiction

on or before Nov 30, 2021

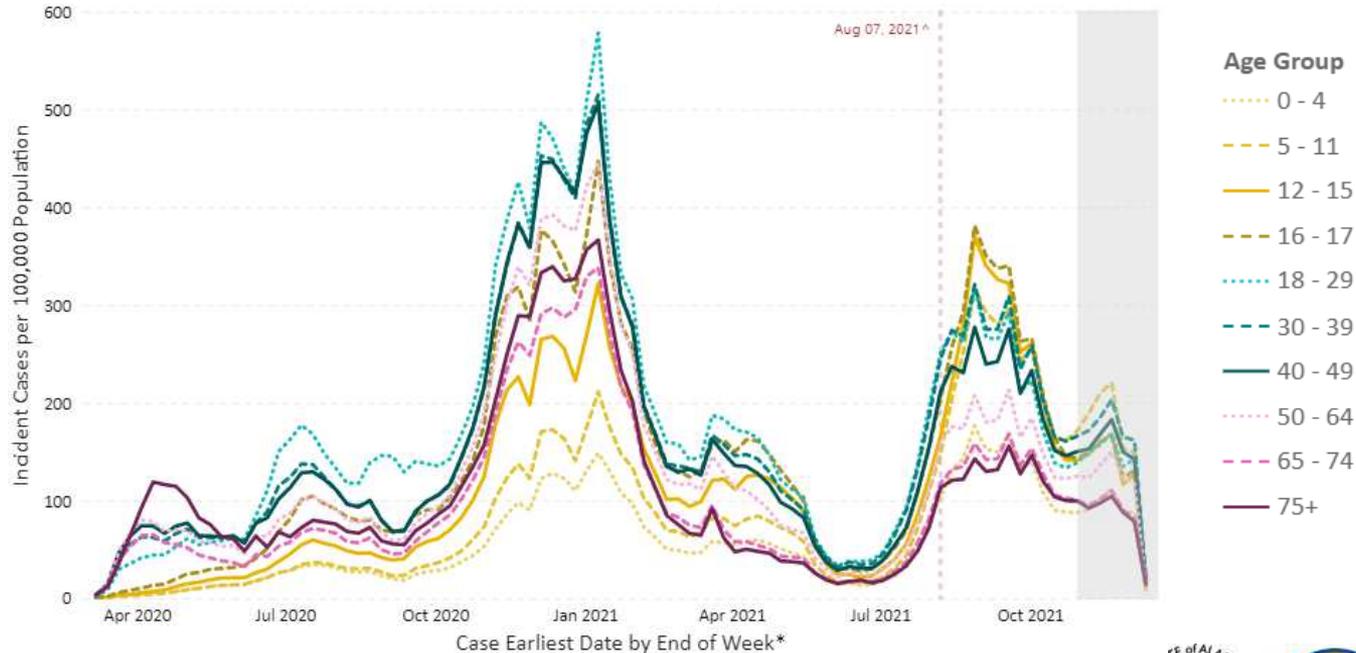


COVID-19 Infection in Children: U.S.

During recent months, children 5-11 years are making up a greater proportion of COVID-19

COVID-19 Weekly Cases per 100,000 Population by Age Group, United States

March 01, 2020 - December 11, 2021*



Indirect Impacts of COVID-19 Pandemic on Children



- Worsening of mental or emotional health



- Widening of existing education gaps



- Decreased physical activity and increased body mass index (BMI)



- Decreased healthcare utilization



- Decreased routine immunizations



- Increase in Adverse Childhood Experiences (ACEs)



- Loss of caregivers

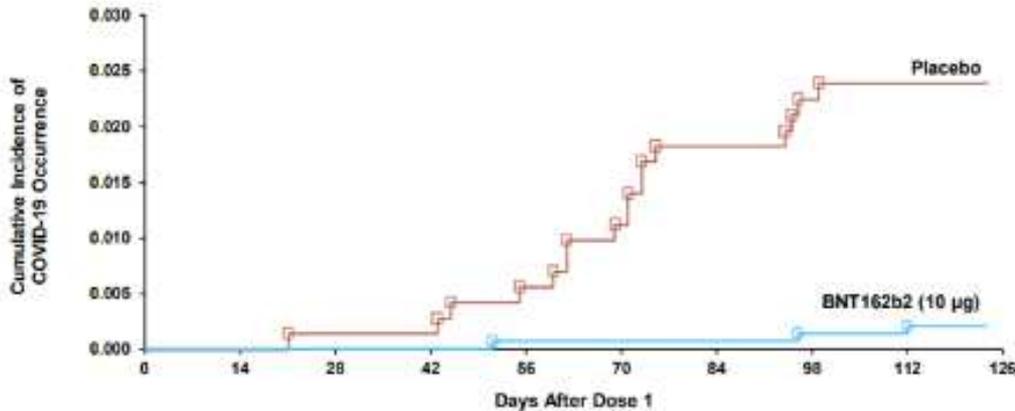
More than 140,000 children in the U.S. have lost a caregiver due to the pandemic.

Hillis, SD., et al. (2021) Covid-19-Associated Orphanhood and Caregiver Death in the United States. *Pediatrics*. DOI: 10.1542/peds.2021-053760 <https://www.nih.gov/news-events/news-releases/more-140000-us-children-lost-primary-or-secondary-caregiver-due-covid-19-pandemic>



Reasons to Vaccinate

- Vaccination is safe and effective
- Immunization can make a difference in your child's life.
- Immunization protects others you care about.
- Vaccination can save your family time and money.
- Vaccination is our best defense against COVID-19 infection.



What to Expect Before, During & After Vaccination

What to Expect Before, During, and After Vaccination.

Prepare for your child's COVID-19 vaccine appointment and know what to do to support your child.



Before the visit

- **Schedule your child's COVID-19 vaccination** at your pediatrician's office, a local vaccination clinic or at your local pharmacy. Some sites require appointments while others have walk-in hours. Search for pediatric COVID-19 vaccine providers near you at vaccines.gov
- Call your child's pediatrician or primary care doctor and tell them you're planning to have your child vaccinated. **Ask questions and share any concerns you may have.**
- Your child can also receive routine shots at the same appointment for the COVID-19 shot. This includes getting an annual flu shot. **Ask your health care provider if your child is caught up on all routine immunizations.**
- **Talk with your child** before the appointment. Tell your child what to expect and remind them that vaccines will help keep them healthy.
- Depending on your child, **consider bringing their favorite toy** to engage and comfort them.

What to Expect Before, During & After Vaccination



At the clinic

- Ask any additional questions you may have.
- At the time of the vaccination, you can distract and **comfort your child with a song, toy, or special blanket.**
- **Cuddles and praise** will reassure your child that this is okay.
- If your child is younger, holding them on your lap during the immunization may help.
- After your child receives their first vaccine, **schedule their second dose.** Make sure that your pediatrician's office has a copy of the card in your child's medical record.
- **Keep the paper vaccination card you receive.** Don't laminate the card in case more information needs to be added. Take a photo of it or copy it and keep everything in a safe place. For privacy reasons, don't share a photo of the card on social media.

What to Expect Before, During & After Vaccination

After the Visit

- **Common side effects typically go away in a day or two** and may include redness or soreness at the injection site or fever, chills, tiredness, or headache.
- Ask your child's doctor if you can give your child a pain reliever if they are experiencing common side effects.
- If you see something that concerns you call your child's health care provider.
- Remember that your child is considered **fully vaccinated two weeks after their second dose**. Encourage your child to keep doing their part to protect themselves and others by wearing a mask and following other COVID precautions.
- When your child is fully vaccinated, layering protection may still be important depending on COVID-19 case rates in your community, but you will have added confidence that your child is protected!



Vaccines add a strong layer of protection



Use layered prevention strategies to help protect yourself and to protect people who aren't fully vaccinated yet:

- Vaccines
- Testing
- Masks
- Physical distancing
- Handwashing
- Ventilation



Masks Work - Summary of CDC Science Brief: The Science of Masking to Control COVID-19

Cloth masks reduce community exposure to SARS-CoV-2

Cloth masks offer both source control and personal protection

- Individual benefit increases with increasing community mask use

Wearing masks by both the infected and uninfected person gives the uninfected person the most protection

- “Masking can protect you and works best for you when everyone does it”
- “When you wear a mask, you protect others as well as yourself”

Universal masking policies can help prevent the need for school shutdowns

- Especially if combined with other non-pharmaceutical interventions such as social distancing, hand hygiene, and adequate ventilation



Which Mask Should I Wear?

- One that you like!
- Fits you well, with no gaps by your nose or at the sides
- Made of at least two layers of fabric

DO choose masks that



Have two or more layers of washable, breathable fabric



Completely cover your nose and mouth



Fit snugly against the sides of your face and don't have gaps



Have a nose wire to prevent air from leaking out of the top of the mask



Monoclonal Antibody Treatment

- **Get tested early.** This treatment works best when used early in the disease (must be within 10 days of onset of symptoms). Testing ensures those who test positive get the treatment they need.
- If given soon after testing positive for COVID-19, monoclonal antibodies help prevent severe illness and hospitalizations.



TESTED POSITIVE FOR COVID-19?
ASK YOUR HEALTH CARE PROVIDER
OR CALL 907-646-3322 TO SEE IF
**MONOCLONAL ANTIBODY
TREATMENT**
IS RIGHT FOR YOU.

FACE SPACE VACCINATE

The infographic features a blue background with a white silhouette of a person. Several orange antibody molecules are shown binding to the person's body. A white coronavirus particle is visible in the upper left. At the bottom, three circular icons represent 'FACE' (a person wearing a face mask), 'SPACE' (two people with a plus sign between them), and 'VACCINATE' (a vaccine vial). The text is in white and orange, with the main title in large, bold, orange letters.

http://dhss.alaska.gov/dph/epi/id/SiteAssets/Pages/HumanCoV/flyer_InfusionTherapy.pdf

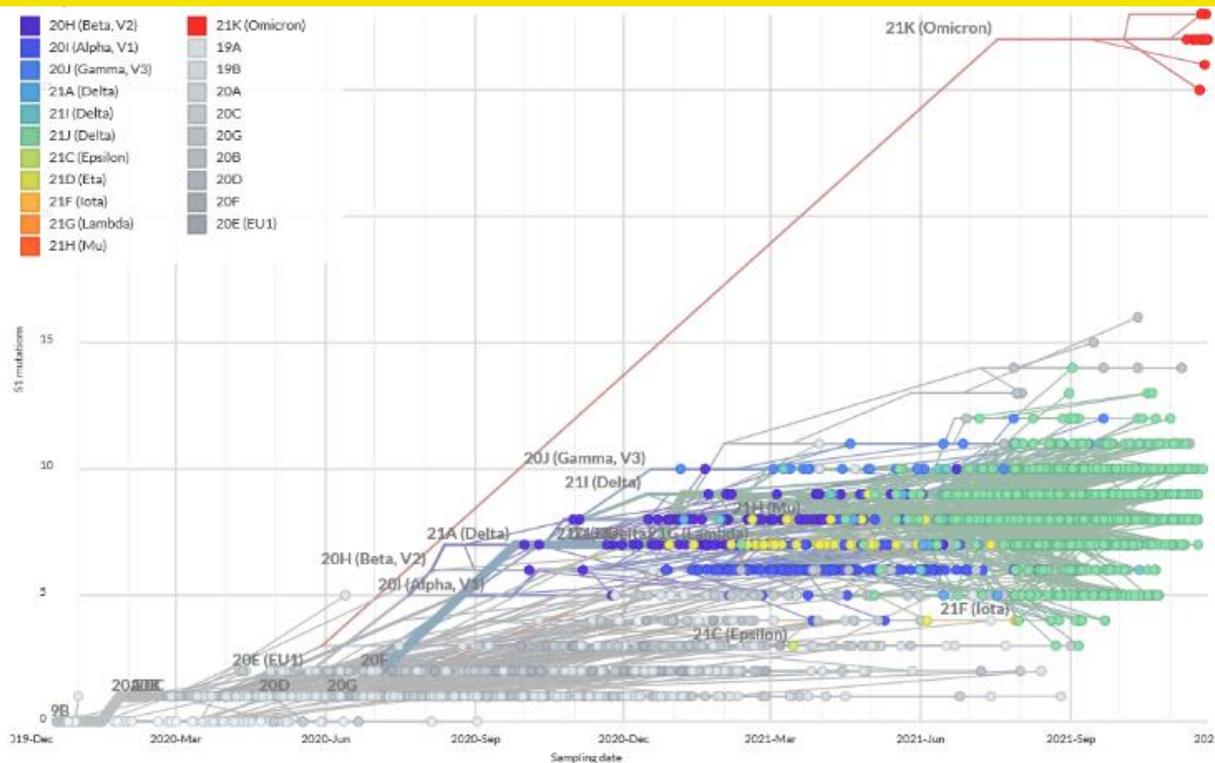


Post-COVID Conditions, “Long COVID”

- Although most people with COVID-19 get better quickly, some people experience post-COVID conditions
- Post-COVID conditions are health problems people can experience four or more weeks after first being infected
- Multisystem Inflammatory Syndrome in Children (MIS-C) is a rare but serious complication associated with COVID-19 that occurs in children, adolescents, and young adults
- For people who are eligible, getting vaccinated against COVID-19 as soon as you can is the best way to prevent getting COVID-19 and can also help protect those around you
- The best way to prevent post-COVID conditions is to prevent COVID-19 illness



In the News: Omicron variant



Sequencing data shows that Omicron (red in the top right) is a variant with more than 50 mutations, including 26 to 32 mutations in the spike protein.

<https://nextstrain.org/ncov/gisaid/africa>



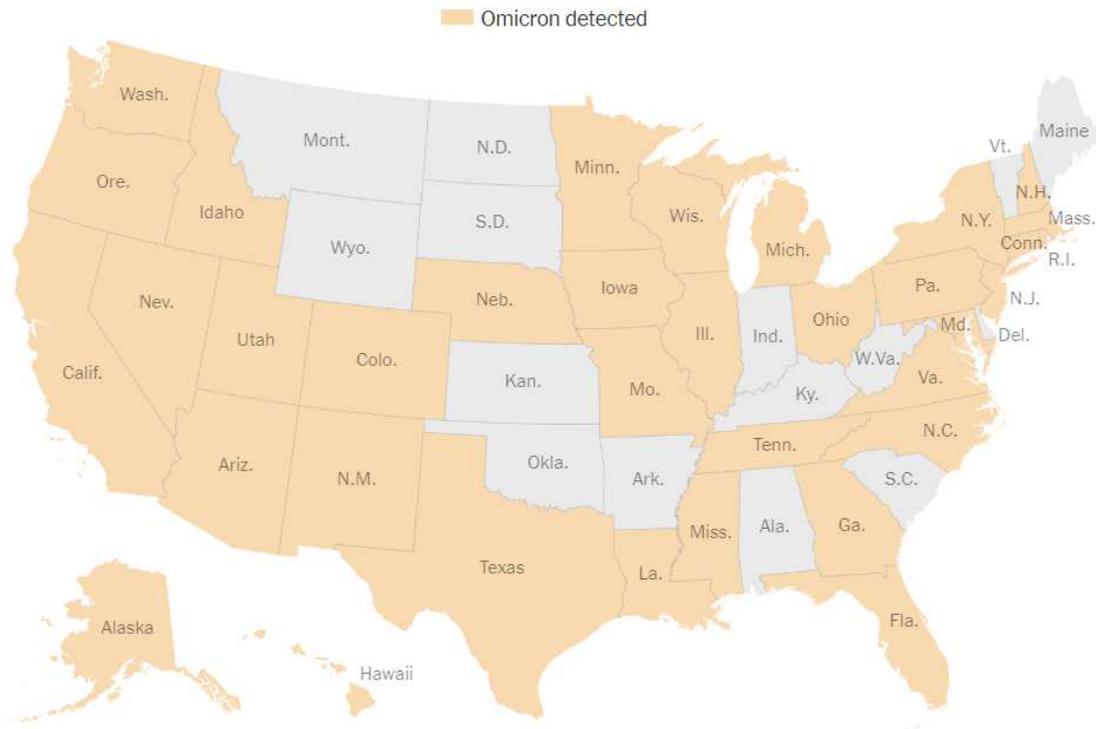
Omicron Variant: What To Do

- **Get vaccinated** - Now is a great time to start your vaccine series if you're not yet vaccinated against COVID-19.
- **Get boosted** - If you are 16+ and it has been >6 months since your second dose of mRNA vaccine (Moderna or Pfizer) or 2 months since a J&J vaccine, please get a booster dose as soon as possible for added protection. Even imperfect protection is better than little to no protection.
- Take care of your physical and mental health.



Omicron – U.S. Locations of Detection

December 15, 2021



New CDC Omicron webpage: <https://www.cdc.gov/coronavirus/2019-ncov/variants/omicron-variant.html>

New CDC Omicron science brief: <https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/scientific-brief-omicron-variant.html>

Map: <https://www.nytimes.com/interactive/2021/health/coronavirus-variant-tracker.html>



Indirect Impacts of COVID-19 Pandemic on Children



- Worsening of mental or emotional health



- Widening of existing education gaps



- Decreased physical activity and increased body mass index (BMI)



- Decreased healthcare utilization



- Decreased routine immunizations



- Increase in Adverse Childhood Experiences (ACEs)



- Loss of caregivers

More than 140,000 children in the U.S. have lost a caregiver due to the pandemic.

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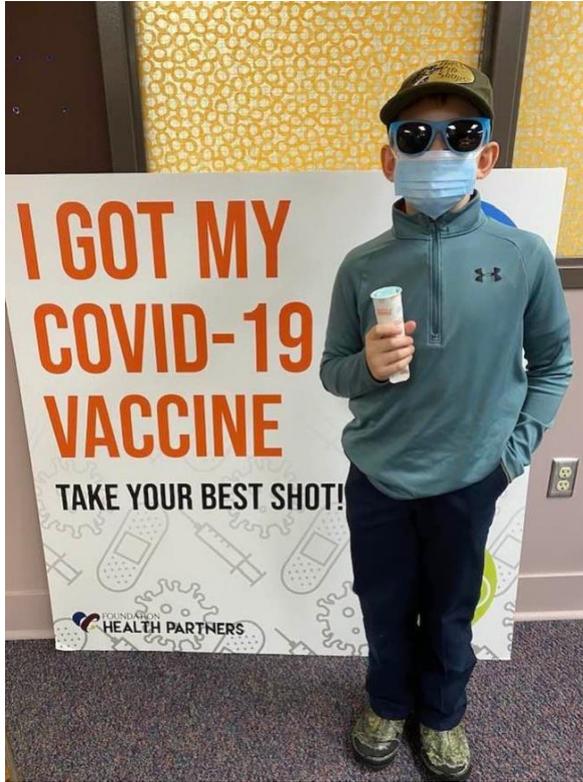


Family Education & Communication

- Provide resources relating to immunizations in advance of vaccine encounter
- Listen to questions with empathy
- Ask open-ended questions to explore concerns
- Ask permission to share information
- Help them find their own reason to get vaccinated
- Facilitate a positive vaccination experience
- Now is a great time to get caught up on all childhood immunizations



Commonly Asked Questions



Q: Why do kids need to get vaccinated? I didn't think they get that sick?

Q: My kids already had COVID. Do they need to get vaccinated?

Q: Can kids get the COVID-19 vaccine at same time as other vaccines?



Commonly Asked Questions



Q: Are there long-term side effects to COVID-19 vaccination?

Q: Can getting vaccinated impact long-term fertility?

Q: I've heard about myocarditis. Can you get myocarditis from the vaccine?



Commonly Asked Questions



Q: How can I help prepare my child for getting the vaccine?

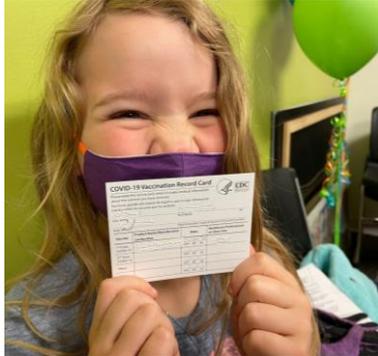
Q: I can't take time off from work to make the appointment and be available in case my child has side effects. What do you suggest?

Q: I'm not sure I can afford the shot. Does it cost money?





Thank you!
Questions?

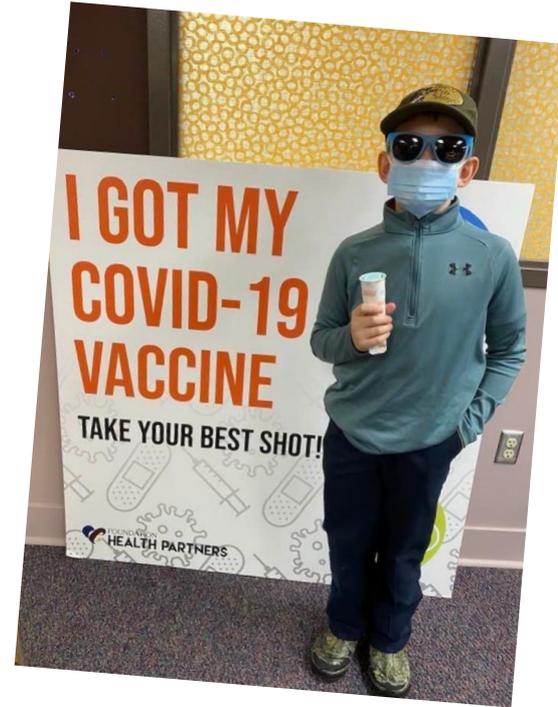


Have a Healthy, Happy and Safe Holiday Season!



Resources

- [vaccines.gov](https://www.vaccines.gov) or [covidvax.alaska.gov](https://www.covidvax.alaska.gov)
- [COVID-19 Vaccine Data Dashboard](#)
- [COVID-19 Vaccine Safety](#)
- [CDC COVID-19 Vaccine Information](#)





COVID-19 VACCINATIONS IN PREGNANCY: WHAT DO WE KNOW NOW?

TORRI METZ, MD
ASSOCIATE PROFESSOR
MATERNAL-FETAL MEDICINE
VICE-CHAIR FOR RESEARCH
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

DISCLOSURES

- Participated in Medical Advisory Board and am a site PI for Pfizer Phase 2/3 COVID-19 vaccination in pregnancy trial

IS VACCINATION IN PREGNANCY ALLOWED?

- Under the EUA and full FDA approval for COVID-19 vaccines
 - No restriction based on pregnancy or breastfeeding status
 - Pregnant people can choose to be vaccinated

WHAT ARE THE VACCINE TYPES?

- mRNA vaccines (Pfizer and Moderna)
 - Genetic material that encodes the spike protein of SARS-CoV-2 delivered in lipid nanoparticle
- Adenovirus (J&J)
 - Inactivated virus that delivers the gene for the spike protein of SARS-CoV-2 into the host cell

VACCINE TYPE DOSING/EFFICACY

Type	Dose	Efficacy
Pfizer	2 doses 21 days apart	95% after 2 nd dose
Moderna	2 doses 28 days apart	94% after 2 nd dose
J&J	1 dose	72% moderate dz, 85% severe dz

DO WE HAVE ANY SAFETY DATA IN PREGNANCY NOW?

- YES!



DEVELOPMENT AND REPRODUCTIVE TOXICITY DATA

- Pfizer- no harmful effects when giving prior to mating or during gestation in rats
- Moderna- no harmful effects on female reproduction or embryo development
- J&J- no harmful effects when giving prior to mating or during gestation

CDC V-SAFE AND VAERS DATA

- 35,691 v-safe participants who received COVID vaccine in pregnancy (12/14-2/28/2021)
 - Headache, myalgias, chills, fever less frequent in pregnant than non-pregnant patients
 - Injection site pain more frequent

CDC V-SAFE AND VAERS DATA

- 3,958 participated v-safe pregnancy registry
- 827 completed pregnancies
 - 12.6% pregnancy loss
 - 9.4% preterm birth
 - 3.2% small for gestational age
 - No neonatal deaths

CDC V-SAFE AND VAERS DATA

Table 4. Pregnancy Loss and Neonatal Outcomes in Published Studies and V-safe Pregnancy Registry Participants.

Participant-Reported Outcome	Published Incidence*	V-safe Pregnancy Registry†
	%	no./total no. (%)
Pregnancy loss among participants with a completed pregnancy		
Spontaneous abortion: <20 wk ¹⁵⁻¹⁷	10–26	104/827 (12.6)‡
Stillbirth: ≥ 20 wk ¹⁸⁻²⁰	<1	1/725 (0.1)§
Neonatal outcome among live-born infants		
Preterm birth: <37 wk ^{21,22}	8–15	60/636 (9.4)¶
Small size for gestational age ^{23,24}	3.5	23/724 (3.2)
Congenital anomalies ^{25**}	3	16/724 (2.2)
Neonatal death ^{26††}	<1	0/724

CDC V-SAFE AND VAERS DATA

- As of July 19, 2021
 - 136,500 pregnancies enrolled in v-safe with no increase in adverse events
 - 5,100 pregnant individuals enrolled in registry who are being followed by CDC

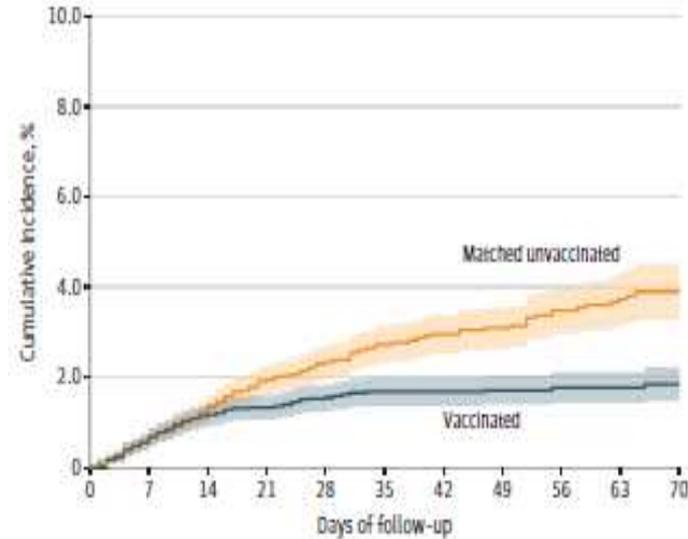
DO WE HAVE ANY EFFICACY DATA IN PREGNANCY NOW?

- YES!



VACCINE EFFICACY

- 7350 vaccinated matched with 7350 unvaccinated
- Followed 28-70 days
- aHR 0.22 (95%CI 0.11-0.43)
- Overall infection rate low (0.3 vs 1.6%)



DO ANTIBODIES CROSS THE PLACENTA TO PROTECT BABIES?

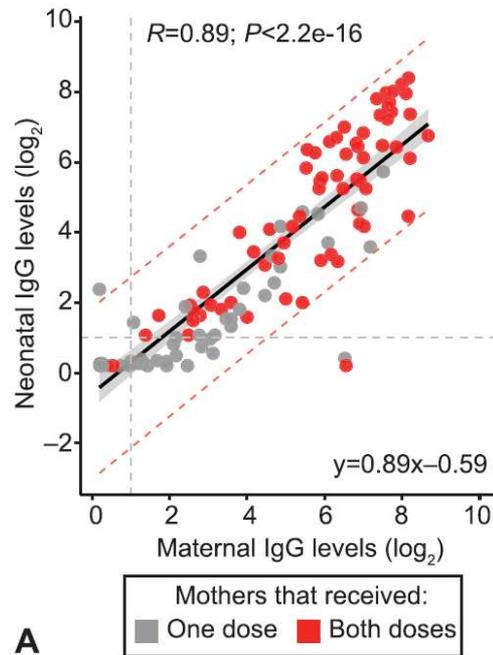
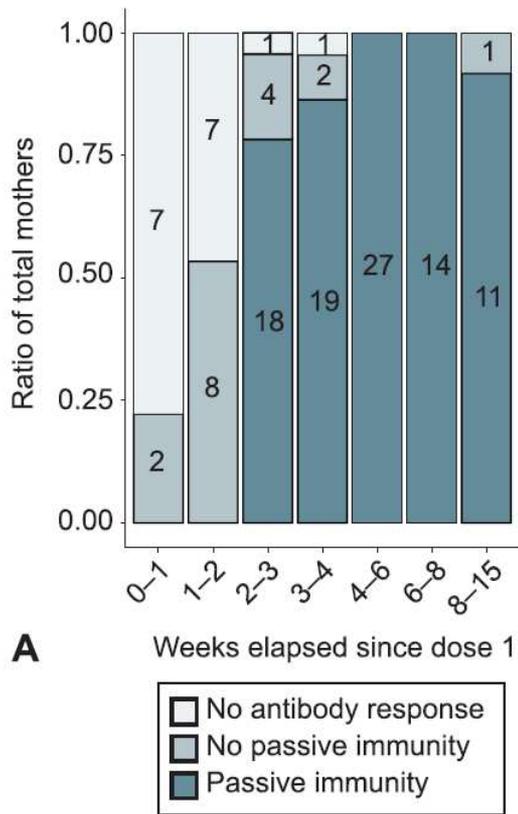
- YES!



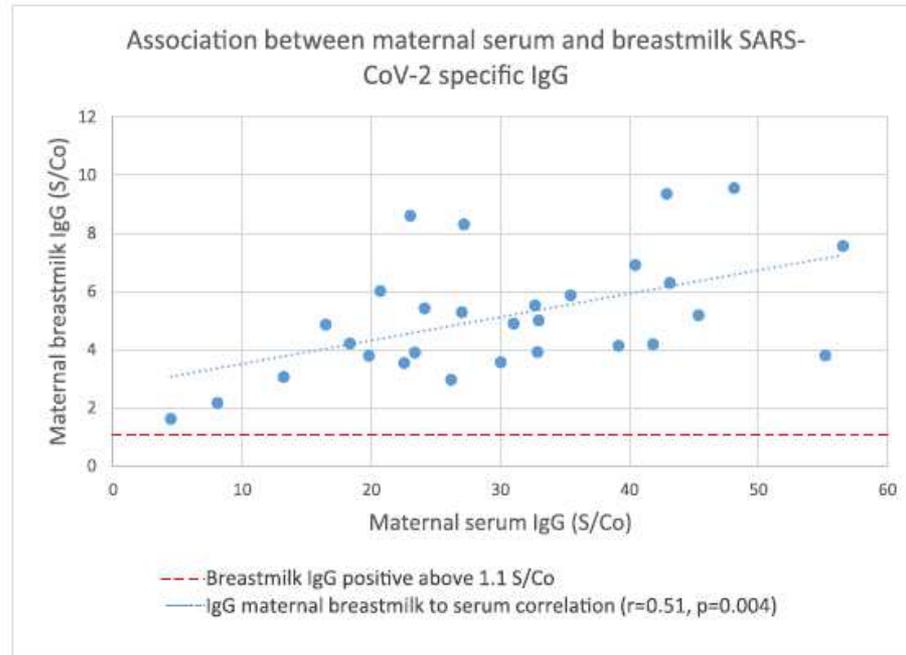
COVID ANTIBODY TRANSFER

- N=122 who received mRNA vaccine for SARS-CoV-2
- No prior SARS-CoV-2 infection
- Maternal and cord blood
- Earliest neonatal passive immunity detected at 16 days post-vaccine dose #1

COVID ANTIBODY TRANSFER



DO ANTIBODIES TRANSFER IN BREASTMILK?



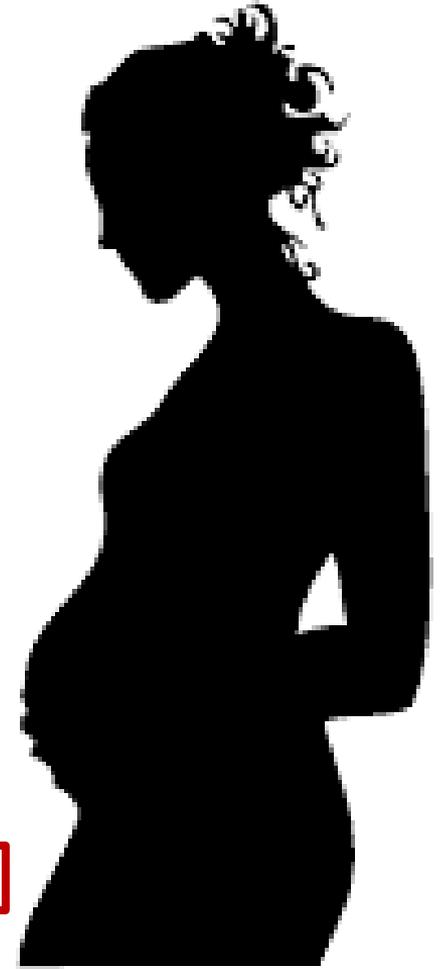
IS HAVING COVID-19 DURING PREGNANCY DANGEROUS?

- YES!

RISK OF COVID-19 IN PREGNANCY

- Do pregnant individuals have a greater risk of severe illness than non-pregnant?
 - MMWR report of cases submitted to the CDC from Jan 22 to October 3
 - **N= 1,300,938 reproductive-age females** who tested positive for SARS-CoV-2
 - Data on pregnancy status available for 461,825 reproductive-age females
 - 88.7% were symptomatic
 - Among symptomatic females, 5.7% (23,434) were pregnant

MMWR Weekly Report (Nov 2, 2020)



RISK OF COVID-19 IN PREGNANCY

- **MMWR Report**

- **Pregnant women were at increased risk of**

- **ICU admission: 10.5 vs 3.9 per 1,000 cases** (aRR 3.0, 95% CI=2.6-3.4)
- **Mechanical ventilation: 0.5% vs 0.3%** (aRR 1.7, 95% CI 1.2-2.4)
- **Death: 1.5 vs 1.2 per 1,000 cases** (aRR 1.7, 95% CI 1.2-2.4)

RISKS OF COVID-19 IN PREGNANCY

- **Do pregnant patients with COVID-19 have greater risk of complications than those without COVID-19?**
- Retrospective cohort of all deliveries from April-Nov
 - All-payer database encompassing 20% of U.S. population
- N=406,446 patients hospitalized for childbirth
 - 6,380 (1.6%) COVID-19 diagnostic code

RISKS OF COVID-19 IN

Outcome	No COVID N=400,066	With COVID N=6,380	Unadjusted OR	Adjusted OR
Cesarean	27.5%	28.9%	1.08 (1.02-1.14)	1.07 (1.02-1.13)
PTL	4.0%	5.2%	1.31 (1.17-1.46)	1.19 (1.06-1.33)
PTB	5.8%	7.2%	1.26 (1.14-1.38)	1.17 (1.06-1.29)
Stillbirth	0.3%	0.5%	1.66 (1.18-2.33)	1.23 (0.87-1.75)
PreE	6.8%	8.8%	1.36 (1.22-1.46)	1.21 (1.11-1.33)
Eclampsia	0.1%	0.1%	1.74 (0.86-3.52)	1.56 (0.77-3.16)
HELLP	0.2%	0.5%	2.10 (1.48-2.97)	1.96 (1.36-2.81)
VTE	0.1%	0.2%	3.52 (2.09-5.92)	3.43 (2.01-5.82)
ICU	0.4%	3.3%	7.84 (6.78-9.06)	6.47 (5.55-7.55)
Vent	0.1%	1.3%	25.77 (20.03-33.15)	23.70 (17.95-31.29)



SMFM: Provider Considerations for Engaging in COVID-19 Vaccine Counseling With Pregnant and Lactating Patients

12.3.2021 (last published 10.26.21)

SMFM recommends that pregnant and lactating people be vaccinated against COVID-19. The [Centers for Disease Control and Prevention](#) (CDC) state that “COVID-19 vaccination is recommended for all people aged 12 years and older, including people who are pregnant, lactating, trying to get pregnant now, or might become pregnant in the future.”

ACOG RECOMMENDATIONS

- ACOG recommends pregnant individuals be vaccinated against COVID-19
- ACOG recommends lactating individuals be vaccinated against COVID-19

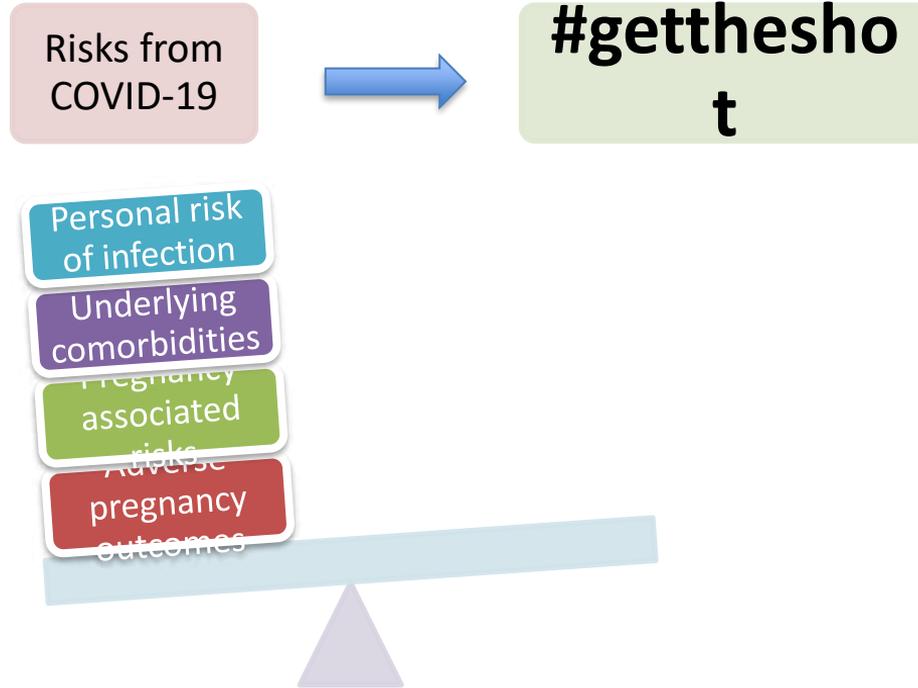
WHEN SHOULD I GET THE VACCINE?

- No specific guidance as to timing of vaccination
- OK in any trimester and for those who are planning pregnancy
- Pregnancy does not need to be avoided after vaccination
- Complete the series if started

COVID-19 BOOSTERS

- Recommended for pregnant people
- 6 months after 2nd dose of primary mRNA series
- 2 months after 1st dose J&J

WEIGHING RISKS AND BENEFITS



Slide courtesy of Dr. Naima Joseph

ACOG RESOURCES

- <https://www.acog.org/womens-health/infographics/why-should-i-get-the-covid-19-vaccine-while-im-pregnant>

THANK YOU!

Questions



Credits

We extend a special thank you to the team that created this webinar:

- Sabra Anckner, Association of Maternal and Child Health Programs
- Casey Amayun, National Alliance of Home Visiting Models
- Dr. Torri Metz, University of Utah
- Dr. Mishelle Nace, Foundation Health Partners, state of Alaska
- Heather Tritten, National HIPPIY Network

