

# COVID-19 (Novel Coronavirus) Pregnancy, Breastfeeding and COVID-19

## Keeping safe while pregnant or breastfeeding

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### What you should know:

#### Are pregnant people at higher risk of COVID-19?

Pregnant people or recently pregnant people who are older (35 and over), and have pre-existing medical conditions such as asthma, hypertension and diabetes seem to have an increased risk of developing severe COVID-19. When pregnant people do develop severe disease, they also seem to require care in intensive care units more often than non-pregnant people of reproductive age.

We know that pregnant people can be more easily impacted by some respiratory infections, so it is important to take extra precautions. If you experience fever, cough or difficulty breathing, contact your health provider immediately.

#### How can pregnant people protect themselves?

Pregnant people should take the same precautions to avoid COVID-19 infection as the general population. This includes:

- Follow all current public health orders.
- Keep a physical space of 2 metres between yourself and others you do not live with.
- Wear a non-medical, fabric face covering where it is not possible to keep sufficient physical space. Follow all current government and public health directives on wearing face coverings.
- Wash your hands frequently.
- Avoid touching your eyes, nose and mouth.
- Cover your mouth and nose with your bent elbow or tissue when you cough or sneeze. Dispose of the used tissue immediately.
- Call your health care provider if you have a fever, cough or difficulty breathing.

In addition, pregnant people and those who are postpartum, including those affected by COVID-19, should attend their routine care appointments as directed by their health care provider.

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### Can COVID-19 be passed to an unborn or newborn baby?

We still do not know if a pregnant people with COVID-19 can pass the virus to their fetus or baby during pregnancy or birth. To date, the virus has not been found in samples of amniotic fluid or breast milk. It has been recommended to test healthy babies born to the birthing parent with coronavirus, if tests are available. This will help with plans to care for the newborn in the hospital and when discharged.

Newborns are able to catch the virus from an infected parent. However, it is not recommended to separate an infected parent from their newborn unless they are too sick to care for the baby.

### What do I do if I am pregnant and have been diagnosed with COVID-19?

People diagnosed with COVID-19 during pregnancy should be monitored by their health care provider. They may be well enough to remain home in self-isolation or they may be admitted to hospital, depending on the severity of their illness. Each family and home situation will be unique and should be discussed with your health care provider.

### What care should be available during pregnancy and childbirth if I have COVID-19?

All pregnant people, including those with confirmed or suspected COVID-19 infections, have the right to high quality care before, during and after childbirth. This includes prenatal, newborn, and postnatal care, with an emphasis on mental health support throughout.

### Do pregnant people with suspected or confirmed COVID-19 need to give birth by caesarean section?

No. Caesarean sections should only be performed when medically justified.

### Can I touch and hold my newborn baby if I have COVID-19?

Yes. Close contact and early, exclusive breastfeeding helps a baby to thrive. You can take the following precautions to avoid spreading the virus to your baby:

- Wash your hands often.
- Practice proper respiratory etiquette.
- Wear a non-medical mask or face covering, especially during feeding time. Homemade masks can be used. Wash your hands immediately before and immediately after taking off your mask.

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Be careful not to touch your face or mask while using it. Cloth masks should be washed after every use. Cloth masks can be washed with other items using a hot cycle.

- Ensure the environment around you is [clean and disinfected](#).

### Can people with COVID-19 breastfeed?

Yes. The Public Health Agency of Canada, the World Health Organization and the Canadian Paediatric Society state people with COVID-19 can breastfeed, or if unwell, may choose to pump.

You should follow [Health Canada's COVID-19 hygiene, mask and cleaning recommendations](#), including:

- Wash your hands before and after touching the baby or before pumping.
- Cover your mouth and nose with your bent elbow or tissue when you cough or sneeze. Then dispose of the used tissue immediately because these droplets spread virus. By following good hygiene, you protect the people around you, including your baby.
- Wear a non-medical mask or face covering. Routinely clean and disinfect surfaces you have touched; if pumping, clean and sanitize all equipment.

### I have COVID-19 and am too unwell to breastfeed my baby directly. What can I do?

If you are too unwell to breastfeed your baby due to COVID-19 or other complications, you should be supported to safely provide your baby with breast milk in a way that is possible, available and acceptable to you. This could include expressing milk when you feel unwell and breastfeeding when you are feeling better.

### Should pregnant or breastfeeding people receive the COVID-19 vaccine once they are eligible?

According to the [SOGC Statement on COVID-19 Vaccination in Pregnancy](#), vaccines in general are safe and effective when delivered to pregnant individuals. While data on the safety and efficacy of COVID-19 vaccines in pregnant populations is limited, post-marketing surveillance has identified no

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signals for adverse pregnancy or neonatal outcomes associated with administration of COVID-19 vaccination.

However, it is known that the risk of infection and/or severe illness from COVID-19 outweighs the risk of being vaccinated. Severe infection with COVID-19 carries risks to maternal, fetal, and neonatal health. Due to maternal age, underlying health conditions or other risk factors, some pregnant individuals are at a higher risk of severe COVID-related illness.

NACI has advised “that a complete vaccine series with a COVID-19 vaccine should be offered to pregnant individuals in the authorized age group, without contraindications to the vaccine, if a risk assessment deems that the benefits outweigh the potential risks of the individual and the fetus, and if informed consent includes discussion about the absence of evidence on the use of COVID-19 vaccine in this population”.

Therefore, it is recommended that pregnant individuals should be offered vaccination against COVID-19 at any time during pregnancy or while breastfeeding if no contraindications exist.

In addition, NACI has outlined that mRNA vaccines are preferred for use during pregnancy, due to recently published data from a study in the United States indicating that mRNA COVID-19 vaccines are safe in pregnant women. Also, treating Vaccine-Induced Thrombotic Thrombocytopenia (VITT) during pregnancy, should it occur following the administration of a viral vector vaccine, can be complex.

People who are pregnant or breastfeeding should talk to their health care providers to discuss the risks and benefits of receiving the COVID-19 vaccine so they can make an informed choice once they are [eligible](#) for the vaccine. Please see the [Vaccination in Pregnancy & Breastfeeding Patient Decision-Making Tool](#) for further information and to help make an informed decision about the COVID-19 vaccination during pregnancy and breastfeeding.

Chief Public Health Officer of Canada, Dr. Theresa Tam, said there is no reason the COVID-19 vaccine wouldn't be effective during pregnancy, and pointed to the recent SOGC recommendation that the vaccine should be available to pregnant people in all provinces. Dr. Tam has also suggested that pregnant or breastfeeding people talk to their health care providers to help them in making their decisions.

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### When during pregnancy should people receive the COVID-19 vaccine and vaccine intervals?

Currently, vaccination may be considered at any gestational age or any trimester, including the first trimester.

There is no clear evidence to direct whether spacing of vaccines is required. In the absence of evidence, the National Advisory Committee on Immunization (NACI) recommends spacing any other vaccines 28 days from completion of the COVID-19 vaccines. This recommendation is based on the risk of an increased inflammatory response, and the potential for confusion of any adverse events between different vaccines.

The following has been recommended given this information:

- Wait 14 days after any other vaccine before receiving a COVID-19 vaccine unless prompt administration would be beneficial (e.g. you are in your third trimester of pregnancy).
- After receiving a COVID-19 vaccine dose, where possible wait 28 days before receiving any other vaccine, unless a vaccine is required urgently due to an exposure to a virus such as Hepatitis B. Given the global pandemic and condensed timelines of pregnancy, this may not be possible.
- Time-sensitive interventions such as administrations of anti-D immunoglobulin and blood products should not be delayed on account of recent COVID-19 vaccination and could be given at the same time.

### What if an individual becomes pregnant following vaccination?

Individuals who are discovered to be pregnant during their vaccine series or shortly after, should NOT be counselled to terminate pregnancy based on having received the vaccine. If conception is presumed to predate the first dose of the vaccine, it is recommended to follow the same procedures for active surveillance (as available).

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Where pregnancy is detected during the vaccine series (i.e. following the first dose, but ahead of the second dose), pregnant individuals should continue to be offered the opportunity to complete their vaccination series. The decision of whether or not to receive the second dose to complete the vaccine series during pregnancy should be based on an assessment by looking at the potential risks of not being completely vaccinated during pregnancy versus the potential risks of receiving the vaccine during pregnancy. Please talk to your doctor or health care provider.

## Should individuals contemplating pregnancy receive the vaccine?

Ideally, an individual would be vaccinated before becoming pregnant (where possible) to benefit from maximal vaccine efficacy throughout the entire pregnancy. Currently, it is not known whether an individual should delay pregnancy after receiving the vaccine. There is no evidence to suggest that the COVID-19 vaccine causes fertility problems – problems trying to get pregnant. A risk-benefit discussion regarding the COVID-19 vaccine for those planning pregnancy should occur with the individual's doctor or health care provider.

## Sources:

- World Health Organization
- SOGC
- Government of Canada
- Canadian Paediatric Society

For official COVID-19 information visit: [www.swpublichealth.ca](http://www.swpublichealth.ca)