Respiratory Viruses and Pregnancy

What to know

In addition to CDC's Respiratory Virus Guidance, there are several specific considerations for people who are at higher risk for severe illness, including pregnant people.

Overview

Changes in the immune system, heart, and lungs during pregnancy can raise the risk of getting very sick from respiratory viruses.

Why prevention is important

Studies have shown that:

- The odds of admission to an intensive care unit with COVID-19 were 2.5 times higher in pregnant and recently pregnant women than they were for non-pregnant women of reproductive age. <u>Learn more</u>.
- Approximately 28 percent of reproductive-aged women hospitalized with influenza were pregnant across the 2010-2019 influenza seasons. *Learn more*.
- Getting a flu shot can reduce a pregnant person's risk of being hospitalized with flu by an average of 40 percent. *Learn more*,
- Flu, COVID, and RSV vaccination during pregnancy also reduce the risk of severe illness and hospitalization in babies during the first few months of life
 - Over 75 percent of babies hospitalized with COVID-19 were born to women who did not receive the COVID-19 vaccine. <u>Learn more</u>.
 - Flu vaccination during pregnancy reduces the risk of flu hospitalization in infants younger than 6 months by about 40 percent. <u>Learn more</u>.
 - Clinical trials showed that giving the RSV vaccine to pregnant people reduced the risk of their babies being hospitalized for RSV by more than 50 percent. <u>Learn more</u>.

Reducing risk

If you are pregnant or recently had a baby, or if you spend time with someone who is pregnant or recently had a baby, using the prevention strategies described in CDC's <u>Respiratory Virus</u> <u>Guidance</u> are especially important. In addition, there are several specific considerations related to pregnancy.

Immunizations

- o In addition to providing protection to the pregnant person, certain vaccines during pregnancy can help lower the risk for the baby after birth.
- o COVID-19
 - COVID-19 vaccination is recommended for persons who are pregnant, might become pregnant, recently pregnant or breastfeeding.
- o Flu
- Flu vaccination can be administered at any time during pregnancy, before and during the flu season.
- Those who are or will be pregnant during flu season should receive inactivated influenza vaccine (IIV) or recombinant influenza vaccine (RIV). Live attenuated influenza vaccine (LAIV) is not recommended for use during pregnancy.
- o RSV

- To prevent RSV-associated lower respiratory tract infection in infants, CDC recommends either:
 - Administering RSVpreF (Abrysvo) vaccine to the pregnant person OR
 - Administering RSV monoclonal antibody, nirsevimab (Beyfortus) to the infant.
 - Most infants will not need protection from both products.
 - RSVpreF (Abrysvo) vaccine is the ONLY Respiratory Syncytial Virus (RSV) vaccine approved for use during pregnancy to protect infants from RSV-associated lower respiratory tract infection.
 - The vaccine should be administered during weeks 32 through 36 of pregnancy (i.e., 32 weeks 0 days through 36 weeks 6 days).
 - In most of the continental United States, the vaccine should be administered from September through January.

Masks

Note that better fitting <u>masks</u> (for example, N95 or KN95 respirators) are more effective at protecting you from inhaling germs than other types of masks are (for example, cloth masks or surgical/disposable masks).

• <u>Treatment</u>

- The COVID-19 Treatment Guidelines Panel recommends against withholding treatment for COVID-19 from pregnant or lactating individuals because of theoretical safety concerns. For more information on the treatment of COVID-19 in pregnant people, see the NIH Treatment Guidelines on <u>Special Considerations in</u> <u>Pregnancy</u>.
- Flu antivirals are recommended for certain people at high risk for complications from flu, including pregnant people.
- o To learn more about if treatment is right for you, speak with a healthcare provider.