

In the fight against Ebola in the Congo, pregnant women must not be forgotten

August 31 2018, by Daryl Lovell



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The latest outbreak of Ebola in the Democratic Republic of Congo was



declared on Aug. 1, with more than 100 confirmed and probable cases in eastern provinces. According to Congo's health ministry, more than 70 people have died. International health organizations have called for swift action to avoid the severity of the 2013-16 Ebola outbreak in West Africa that killed more than 11,000 people.

Pregnant women were excluded from every vaccine and drug trial in the wake of the Ebola outbreak five years ago, according to Brittany Kmush, an assistant professor and infectious diseases and vaccines expert at Syracuse University's Falk College of Sport and Human Dynamics. Kmush says if this same practice is still in place, the risk of maternal and fetal mortality will once again be extremely high for women, unborn children and young infants.

Kmush says:

"Pregnant women were excluded from every vaccine and drug trial that were initiated in the wake of the 2014 West Africa epidemic (only monoclonal antibody trials enrolled <u>pregnant women</u>.) Pregnant women were also excluded from receiving the experimental vaccine used to help control an outbreak in the Democratic Republic of Congo earlier this year.

"Now, experimental treatments for Ebola are being used in the face of yet another outbreak in the Congo. I do not know if pregnant women are being offered the experimental treatments or not. However, the pregnant women are at a disadvantage either way. Without any treatment, the risk of maternal and fetal mortality are high. Yet the knowledge about the safety and efficacy of these treatments in pregnant women is years behind how well these drugs work in the general population.

"Most clinical trials automatically exclude pregnant women on the grounds of unknown risks for the fetus, often without biological



justification. However, most ethics experts now agree that, in life-threatening situations, pregnant women should be included in clinical trials. This certainly applies in the case of Ebola virus, which has about 90 percent maternal mortality and near 100 percent fetal and neonatal mortality in infected pregnant women.

"The research community needs to recognize the autonomy of pregnant women and let them decide for themselves if they wish to participate in research."

Provided by Syracuse University

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