

Pregnant women share concerns about coronavirus. OB-GYN says issue is about contact

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Rachael Stewart is planning to meet her second child, a baby boy, in about four weeks. A name is chosen, a doula is selected and flights are



booked for her out-of-state mother to be in attendance for the birth.

But now, Stewart, who lives in Chicago, is coming to terms with the fact that many of these "wish list items" have to be rearranged, or canceled, due to the effects of the <u>coronavirus</u> on hospitals.

Her doula will now chime in via video, and her mother, who was flying in from Georgia and hadn't been there the first time Stewart gave birth, will likely be conferenced in as well since the University of Chicago Medicine Family Birth Center now only allows one visitor in the delivery room.

"A lot of what I was hoping for looks like it might not happen," said Stewart, whose husband will be with her in the delivery room.

Riverside, Ill., resident Sarah Magner is 30 weeks pregnant, and said she is keeping her fingers crossed that some things will change by her May 22 due date, like Elmhurst Hospital's new labor and delivery policy that went into effect this week, she said.

"The hospital announced there's no visitors and only one partner in labor and delivery currently," said Magner. "We intended to have a doula in this delivery, so that would exclude having that resource for us and would certainly limit having to see other family or our 2-year-old son while we're in the hospital after birth."

Both Stewart and Magner are healthy and have had low-risk pregnancies, but like most places, local hospitals are taking all necessary precautions to limit the spread of COVID-19, especially for the most vulnerable.

A newborn in London was diagnosed with the illness shortly after being born, The Guardian reported. The child's mother was also diagnosed with the virus; she was hospitalized before giving birth from what



doctors deemed pneumonia, the news site said. Based on reports, officials don't know if the baby got the virus in the womb or during birth. The report did not cite whether the mother delivered by cesarean section.

A February Lancet study suggested that vertical transmission of COVID-19 from a mother to a baby in the womb is unlikely. The study followed nine <u>pregnant women</u> in Wuhan, China, during their third trimester. Each woman gave birth via cesarean section. Some of the women showed symptoms of COVID-19, such as fevers and coughs. All the babies in the study were born alive, and tested negative for the virus.

The study notes that: "Findings from this small group of cases suggest that there is currently no evidence for intrauterine infection caused by vertical transmission in women who develop COVID-19 pneumonia in late pregnancy."

Dr. Melissa Simon, an OB-GYN at Northwestern Medicine, says even though very little is known about what happens during pregnancy amid coronavirus, the real issue is about contact.

"After you give birth, the baby usually gets put on the mom's chest and near the mom's face and that's really where the transmission would happen," said Simon. "So right now, it's the contact that we need to take precaution with after birth, or during breast feeding as well."

Simon acknowledges that limited contact can take a toll on bonding, but she says new moms can still interact with the infant so long as they take the proper precautions.

"We know this could impact relationships and bonding, but as long as you're practicing good hygiene, you'll reduce any chance of transmission," said Simon, who encouraged women to have this



conversation with their <u>health care provider</u>.

If you're breastfeeding an infant and you have the coronavirus, or you're suspected to have the virus, Simon suggests to wear a mask, wash your hands, and limit direct respiratory drops to the baby. If you're pumping, make sure all your equipment is clean.

"We don't know how long the coronavirus can last on a surface, especially a surface such as a bottle or any pumping device," said Simon. The coronavirus can live on surfaces for hours to days, according to the Centers for Disease Control and Prevention.

Pregnant people should only be tested for COVID-19 if they are showing symptoms for the virus, said Simon. She recommends being triaged at home for the symptoms first, then coming into the hospital if necessary. No matter where a woman is in her term, she said, they're telling all pregnant women the same information.

"I want to make sure the people coming into the hospital are really the ones who need to be evaluated," Simon said.

If a pregnant woman is showing symptoms of COVID-19, and she has a pre-existing chronic condition—such as diabetes, asthma or <u>high blood</u> <u>pressure</u>—those women become priority, no matter how far along they are in their pregnancy.

"Pregnant women tend to have a decreased immune response," said Simon, "but if they have (other conditions) that would make their immune system more susceptible to not being able to fight, that can make them even more susceptible to having bad complications from coronavirus."

She believes practicing social isolation and distancing is even more



imperative for pregnant women, but knows it can be hard during a big transition.

"In pregnancy you have a higher chance of feeling anxious or depressed," said Simon. "Even for women who've just given birth in the last few weeks, it's a time with high anxiety, baby blues and depression, and all of those feelings are very valid. It's really important to seek help if you're feeling that way and you're practicing this social distancing, especially in this time of need."

Magner said she's more concerned about mental health than her physical health during this time.

"Isolation when you're going through major life changes makes it much harder," she said. "When you've got a newborn, you're not leaving the house much anyway so it extends the likelihood we'll be spending an awful lot of time inside our four walls over the next few months."

She has plans in place to help with potential loneliness and isolation, like continuing to teach her prenatal fitness class twice a week—but online.

"I'm excited to be able to connect with other moms who are going through the same things as I am," said Magner. "It's nice to have that village even if it is virtual versus in person."

Simon urges pregnant women to ask for help if they are having trouble coping with the isolation.

"Please reach out to your health care provider if you need help and need to get connected to a hotline or case worker or somebody to talk to," Simon said. "We can do that for you."

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