

# Pregnant women with symptomatic COVID-19 more likely to have emergency deliveries

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Pregnant women with symptomatic COVID-19 had a higher percentage of emergency complications when compared to asymptomatic COVID-19 pregnant women, and newborns born to symptomatic

mothers were more likely to require oxygen support and neonatal intensive care unit (NICU) admission, according to a study presented at the ANESTHESIOLOGY 2021 annual meeting.

"Given the evolving nature of COVID-19, it is critical for hospitals to share their experiences of how patients with COVID-19 are treated and how it affects patient outcomes," said Kristine Lane, [medical student](#) and lead author of the study, and Rovnat Babazade, M.D., assistant professor of anesthesiology and senior author, University of Texas Medical Branch, Galveston, Texas. "We wanted to provide insight into a single institution's experience on how labor and [delivery](#) may be affected by the virus as well as the baby's condition after birth."

The study was a retrospective review of pregnant [women](#), between the ages of 16 and 45, who tested positive for COVID-19 and were admitted for delivery from March to September 2020. One-hundred one [pregnant women](#) were included in the study—31 of which were symptomatic. In the symptomatic patients, 42% had fever, 39% had a cough, 26% had shortness of breath, 16% had muscle pain, 16% had chills and 10% had [chest pain](#).

The results showed a higher percentage of symptomatic mothers delivered in emergency circumstances (58.1%) compared to asymptomatic mothers who had less complications during delivery (46.5%). Symptomatic mothers were more likely to have emergency complications such as breech position, decreased fetal movement, too little amniotic fluid, or slowing or stopping of the labor progress. Additionally, babies born to symptomatic mothers were more likely to need respiratory support (31.2% compared to 29%) and be admitted to the [neonatal intensive care unit](#) (43.8% compared to 36.2%). One baby in the symptomatic mothers group tested positive for COVID-19 after delivery, which is concerning for possible vertical transmission to the baby.

"COVID-19 has severe systemic effects on the body, especially symptomatic patients," noted Mrs. Lane. "It is possible that these effects are amplified in pregnant [mothers](#), who have increased fetal and maternal oxygen demands. The decreased oxygenation could contribute to the increase in cesarean deliveries, as well as the possibility that physicians caring for symptomatic patients are cautious of the virus' unpredictable nature, so they proactively recommend a cesarean delivery for medium- to high-risk deliveries."

Of note, the cesarean delivery (C-section) rates in the symptomatic women (64.5%) and asymptomatic women (62%) were significantly higher than the normal population delivery rate for C-sections (31.7%) in the U.S.

**More information:** Abstract: A4111: [www.asahq.org/annualmeeting](http://www.asahq.org/annualmeeting)

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