

Why pregnant women shouldn't wait to get flu vaccinations and COVID boosters

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As the winter months and holiday season approach, people will be gathering in large groups and traveling, mostly without wearing masks, setting the stage for what could be a difficult season of COVID-19 and

influenza.

Public health officials are warning of a "twindemic," and say pregnant people may be at increased risk because many are not fully vaccinated. Justin S. Brandt, associate professor in the Division of Maternal-Fetal Medicine, part of the Department of Obstetrics, Gynecology and Reproductive Sciences at Rutgers Robert Wood Johnson Medical School discusses this concern and the importance of vaccination.

What is the current concern?

We are seeing increasing numbers of COVID-19 in the New Jersey and New York area, driven by SARS-CoV-2 omicron subvariants, including BQ.1.1 and BQ.1. These subvariants may evade immune surveillance from vaccination and prior infection more successfully than BA5, which was the predominant [variant](#) this summer.

The flu is here too, and so far this season, there have been at least 880,000 flu illnesses, 6,900 hospitalizations and 360 deaths from flu. Behaviors that allow SARS-CoV-2 to spread also help the flu to spread. If the early weeks of the flu season are indicative of what's to come, we will see substantially more flu cases this year.

Although vaccinated people may get COVID-19 and the flu, there is strong evidence that these vaccinations reduce the risk of severe disease and death.

Those who are pregnant can and should protect themselves by making sure that they are up to date with their COVID-19 and influenza vaccinations. These vaccines are safe in pregnancy and are recommended in all trimesters. You should speak with your obstetrician if you have questions or concerns about these vaccines in pregnancy.

Are the COVID-19 bivalent boosters safe throughout pregnancy?

A bivalent vaccine has been available since September. In contrast to the original monovalent vaccine, the bivalent vaccine confers protection against the original virus and the omicron variants BA.4 and BA.5. It is not clear yet how effective this booster will be against the emerging omicron subvariants, but the Centers for Disease Control recommends that all people age 12 and older receive the Pfizer or Moderna bivalent booster at least two months after completing the primary series or at least two months after the last dose of the monovalent booster. The Society for Maternal Fetal Medicine has endorsed these recommendations for people who are pregnant, recently pregnant, and lactating. The Society has also said that the bivalent booster can be given at any time during pregnancy, including the first trimester.

Is it safe to receive the flu and COVID-19 vaccination at the same time during pregnancy?

The COVID-19 and influenza vaccines can be administered at the same time. There is no reason to wait between vaccinations.

Before we worried about more severe disease associated with COVID-19 in pregnancy, we were concerned about the increase risk conferred by influenza. Historically, pregnant people have been at higher risk for flu complications. Sadly, flu vaccination rates were down last year, and we hope that we will not see this trend continue in 2023.

The CDC recommends annual influenza vaccination for all adults, including pregnant people and people who will become pregnant. Pregnant people should receive the inactivated influenza vaccine, which is safe in all trimesters of pregnancy. They are encouraged to get the

vaccine as soon as possible during flu season, which started in October.

What happens if you get COVID-19 or influenza during pregnancy?

If you are pregnant and develop symptoms, you should take a COVID-19 test and be in close communication with your obstetrician.

For people with COVID-19, treatments are available that could reduce the risk of hospitalization, including antiviral medications like Paxlovid (nirmatrelvir/ritonavir) and monoclonal antibodies. Antiviral medications are also available for pregnant people who have the flu and who have been exposed to the flu. Although these medications and others have reduced some of the associated risk, vaccination remains the best strategy to prevent infection and severe illness.

Provided by Rutgers University

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