An international study of COVID-19 in pregnancy, which included Ann & Robert H. Lurie Children's Hospital of Chicago, found that neonates of booster-vaccinated mothers had less risk of being infected with
COVID-19 compared to those of unvaccinated mothers.

Babies of booster-vaccinated mothers also had the lowest rates of preterm birth, respiratory distress syndrome and days in the neonatal intensive care unit (NICU). Neonates of unvaccinated mothers, however, died twice as frequently as those of vaccinated mothers. The study was conducted when omicron was the variant of concern.

The findings were published in the American Journal of Obstetrics and Gynecology.

"Our study demonstrates the clear benefits of COVID-19 vaccination for pregnant women and their infants," said co-author Jagjit Teji, MD, neonatologist and site Principal Investigator at Lurie Children's, and Health System Clinician of Pediatrics at Northwestern University Feinberg School of Medicine. "As the protective effect of COVID-19 vaccination decreases with time, to ensure that newborns are maximally protected against COVID-19, women should receive a vaccine or booster dose no more than 14 weeks before the expected date of delivery."

The study involved 40 hospitals in 18 countries (Argentina, Brazil, Egypt, France, Indonesia, Israel, Italy, Japan, Mexico, Nigeria, North Macedonia, Pakistan, Spain, Switzerland, Turkey, UK, Uruguay and the U.S.). Lurie Children's study participants were recruited from Northwestern Medicine Huntley Hospital's Maternal, Newborn and Intermediate Care Nursery areas, where Lurie Children's neonatologists provide coverage.

"Our study also showed that babies of diagnosed mothers did not have an increased risk of being infected with practices such as skin-to-skin contact and direct breastfeeding," said Dr. Teji. "Also, none of the neonates of vaccinated mothers had a congenital malformation. Overall, our findings should be reassuring to pregnant women who may be
hesitant about COVID-19 vaccination."


Provided by Ann & Robert H. Lurie Children's Hospital of Chicago


This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.