

GENERAL ADVICE FOR THE CARE OF PREGNANT OR BREASTFEEDING PATIENTS

The Royal Australasian and New Zealand College of Obstetricians and Gynaecologists notes:

- pregnant patients with COVID-19 have a higher risk of morbidity and mortality compared with non-pregnant patients with COVID-19 of the same age, and are more likely to be hospitalised, be admitted to an intensive care unit (ICU) and to require invasive ventilation
- pregnant patients who are overweight or obese (body mass index >30 kg/m²), have pre-existing hypertension or diabetes (type 1 or 2) are more likely to suffer severe COVID-19 than women without these conditions
- an increased risk of miscarriage has not been identified for women trying to conceive or those in early pregnancy.¹⁵ The current recommendations for pregnancy and perinatal care from the National COVID-19 Clinical Evidence Taskforce (noting these would be considered in collaboration with obstetrics) include the following:
 - The use of antenatal corticosteroids for women at risk of preterm birth is supported as part of standard care, independent of the presence of COVID-19.
 - The use of magnesium sulfate in pregnancy for fetal neuroprotection for women at risk of preterm birth is supported as part of standard care, independent of the presence of COVID-19.
 - The use of magnesium sulfate in pregnancy for the management of severe pre-eclampsia or eclampsia is supported as part of standard care, independent of the presence of COVID-19.
 - The mode of birth should remain as per usual care, and currently no evidence supports that a caesarean section for women with COVID-19 reduces the risk of vertical transmission to the newborn. Respiratory deterioration due to COVID-19 might prompt urgent delivery on an individual basis.
 - Early skin-to-skin contact after birth and during the postnatal period is supported, independent of the presence of COVID-19. However, parents with COVID-19 should use infection prevention and control measures (mask and hand hygiene).
 - Breastfeeding is supported, irrespective of the presence of COVID-19. However, women with COVID-19 who are breastfeeding should use infection prevention and control measures (mask and hand hygiene) while infectious.
 - For women with COVID-19 who have given birth, support rooming-in of mother and newborn in the birth suite and on the postnatal ward when both mother and baby are well. However, women with COVID-19 should use infection prevention and control measures (mask and hand hygiene).¹