

To: CAHAN San Diego Participants

Date: October 6, 2021
From: Public Health Services

Health Advisory Update #41: Coronavirus Disease 2019 (COVID-19) Vaccine Update: COVID-19 Vaccination for Pregnant People to Prevent Serious Illness, Deaths, and Adverse Pregnancy Outcomes from COVID-19

Key Messages

- In the US, the highest number of COVID-19-related deaths in pregnant people (n=22) in a single month of the pandemic was reported in August 2021.
- COVID-19 vaccination is strongly recommended either before or during pregnancy because the benefits of vaccination outweigh known and potential risks.
- The Centers for Disease Control and Prevention (CDC) issued a <u>Health Advisory</u> recommending urgent action to
 increase Coronavirus Disease 2019 (COVID-19) vaccination among people who are pregnant, recently pregnant
 (including those who are lactating), who are trying to become pregnant now, or who might become pregnant in the
 future.

Situation

Although the absolute risk from COVID-19 is low, symptomatic pregnant individuals when compared with those who are not pregnant have more than a two-fold increased risk of requiring ICU admission, invasive ventilation or ECMO, and a 70% increased risk of death. Pregnant people with COVID-19 are also at increased risk for preterm birth, and neonates born to people with COVID-19 are at increased risk for NICU admission. Vertical transmission has also been observed among neonates born to individuals with COVID-19 during pregnancy, 1–4% of neonates tested were positive by rRT-PCR.

With the predominance of the COVID-19 Delta variant since June of this year, the risk of hospitalization and death has also increased for pregnant and recently pregnant people. The Centers for Disease Control and Prevention (CDC) reported that August 2021 had the highest number of COVID-19-related deaths in pregnant people (n=22) in a single month of the pandemic. As a result, CDC issued the attached <u>Health Advisory</u> on September 29, 2021.

San Diego Findings

In San Diego County, there have been no deaths among pregnant County residents; however, there has been a marked difference in case counts and hospitalizations by vaccination status. Since June 1, 2021, through September 30, 2021, there have been 253 laboratory-confirmed cases among pregnant people, including 203 among those not fully vaccinated compared to 50 who were fully vaccinated. Of the 31 hospitalizations in the group of 253, 30 were not fully vaccinated. (*Not fully vaccinated is defined as being unvaccinated or having received a single dose of Moderna or Pfizer COVID-19 vaccines. Fully vaccinated is defined as being 14-days after the 2nd dose of Pfizer or Moderna COVID-19 vaccines or a single dose of Janssen/Johnson & Johnson vaccine.

CDC Health Advisory Recommendations

The Centers for Disease Control and Prevention (CDC) recommends urgent action to increase Coronavirus Disease 2019 (COVID-19) vaccination among people who are pregnant, recently pregnant (including those who are lactating), who are trying to get pregnant now, or who might become pregnant in the future. The recommendations align with those from the <u>American College of Obstetricians and Gynecologists</u> and the <u>Society for Maternal-Fetal Medicine</u> based on increasing <u>evidence</u> of both the safety and effectiveness of COVID-19 vaccination in pregnancy. The benefits of vaccination for both pregnant persons and their fetus or infant <u>outweigh known and potential risks</u>. Despite recommendations for vaccination, <u>uptake of COVID-19 vaccination</u> by pregnant people has been lower than that of non-pregnant people. The CDC <u>Health Advisory</u> provides recommendations for:

- Urgent action to help protect pregnant people and their fetuses/infants,
- Recommendations for Public Health Jurisdictions, and
- Recommendations for Healthcare Providers.

Actions Requested

- 1. If not already enrolled, providers should learn <u>how to enroll in the California COVID-19 vaccination program</u> and participate in COVID-19 vaccination efforts.
- 2. Review patients' COVID-19 vaccination status at each pre- and post-natal visit and discuss COVID-19 vaccination with those who are unvaccinated.
- 3. Reach out to patients with messages encouraging and reinforcing the critical need for vaccination.
- 4. Remind patients that vaccination is recommended even for those with prior COVID-19 infections. Studies have shown that vaccination provides increased protection in people who have recovered from COVID-19.
- 5. Support efforts to ensure people receiving the first dose of an mRNA COVID-19 vaccine (i.e., Pfizer-BioNTech, Moderna) return for their second dose to complete the series as close as possible to the recommended interval.
- 6. Consider a booster dose for eligible pregnant persons.
- 7. Communicate accurate information about COVID-19 vaccines and confront <u>misinformation</u> with evidence-based messaging from credible sources. For example, there is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men.

Resources

CDC: COVID-19 Vaccines While Pregnant or Breastfeeding

CDC: COVID-19 Vaccines for People Who Would Like to Have a Baby

CDC: COVID-19 among Pregnant and Recently Pregnant People

CDC COVID Data Tracker:

Vaccination Among Pregnant People

Data on COVID-19 during Pregnancy: Severity of Maternal Illness

CDC: Toolkit for Pregnant People and New Parents

CDC: Building Confidence in COVID-19 Vaccines

CDC: Who Is Eligible for a COVID-19 Vaccine Booster Shot?

CDPH: COVID-19 Pregnancy, Breastfeeding & Infants (ca.gov)

CDPH: Vaccination During Pregnancy Guidance (ca.gov)

SDC: mRNA COVID-19 Vaccines: Myth vs. Fact

Thank you for your participation.

CAHAN San Diego

County of San Diego Health & Human Services Agency Phone: (619) 692-8499; Fax: (858) 715-6458

E-mail: cahan@sdcounty.ca.gov

Public Website: http://www.cahansandiego.com

Epidemiology and Immunization Services Branch Urgent Phone for pm/weekends/holidays: (858) 565-5255

Secure Website: http://cahan.ca.gov

This is an official CDC HEALTH ADVISORY

Distributed via the CDC Health Alert Network September 29, 2021, 12:00 PM ET CDCHAN-00453

COVID-19 Vaccination for Pregnant People to Prevent Serious Illness, Deaths, and Adverse Pregnancy Outcomes from COVID-19

Summary

The Centers for Disease Control and Prevention (CDC) recommends urgent action to increase Coronavirus Disease 2019 (COVID-19) vaccination among people who are pregnant, recently pregnant (including those who are lactating), who are trying to become pregnant now, or who might become pregnant in the future. CDC strongly recommends COVID-19 vaccination either before or during pregnancy because the benefits of vaccination outweigh known or potential risks. As of September 27, 2021, more than 125,000 laboratory-confirmed COVID-19 cases have been reported in pregnant people, including more than 22,000 hospitalized cases and 161 deaths. The highest number of COVID-19related deaths in pregnant people (n=22) in a single month of the pandemic was reported in August 2021. Data from the COVID-19-Associated Hospitalization Surveillance Network (COVID-NET) in 2021 indicate that approximately 97% of pregnant people hospitalized (either for illness or for labor and delivery) with confirmed SARS-CoV-2 infection were unvaccinated.2 In addition to the risks of severe illness and death for pregnant and recently pregnant people, there is an increased risk for adverse pregnancy and neonatal outcomes, including preterm birth and admission of their neonate(s) to an intensive care unit (ICU). Other adverse pregnancy outcomes, such as stillbirth, have been reported. Despite the known risks of COVID-19, as of September 18, 2021, 31.0% of pregnant people were fully vaccinated before or during their pregnancy.3 In addition, there are racial and ethnic disparities in vaccination coverage for pregnant people. Healthcare providers should communicate the risks of COVID-19, the benefits of vaccination, and information on the safety and effectiveness of COVID-19 vaccination in pregnancy. Healthcare providers should strongly recommend that people who are pregnant, recently pregnant (including those who are lactating), who are trying to become pregnant now, or who might become pregnant in the future receive one of the authorized or approved COVID-19 vaccines as soon as possible.

Background

COVID-19 vaccination is recommended for pregnant people. CDC recommends COVID-19 vaccination for all people aged 12 years and older, including people who are pregnant, recently pregnant (including those who are lactating), who are trying to get pregnant now, or who might become pregnant in the future. CDC recommendations align with those from professional medical organizations serving people who are pregnant, including the American College of Obstetricians and Gynecologists and the Society for Maternal-Fetal Medicine. Accumulating data provide evidence of both the safety and effectiveness of COVID-19 vaccination in pregnancy. CDC strongly recommends COVID-19 vaccination either before or during pregnancy, because the benefits of vaccination for both pregnant persons and their fetus/infant outweigh known or potential risks. Getting a COVID-19 vaccine can prevent severe illness, death, and pregnancy complications related to COVID-19.

COVID-19 vaccination coverage for pregnant people remains low. Despite recommendations for vaccination, uptake of COVID-19 vaccination by pregnant people has been lower than that of non-pregnant people.⁵ In addition, vaccination coverage for pregnant people differs by race and ethnicity, with vaccination coverage being lowest for non-Hispanic Black pregnant people (15.6%) as of September 18, 2021.³ Although the proportion of fully vaccinated pregnant people has increased to 31.0% (as of

September 18, 2021), the majority of pregnant people remain unprotected against COVID-19, and significant disparities exist in vaccination coverage by race and ethnicity.

Pregnant and recently pregnant people with COVID-19 are at increased risk of severe illness, death, and pregnancy complications. Pregnant and recently pregnant people with COVID-19 are at increased risk for severe illness when compared with non-pregnant people. Severe illness includes illness that requires hospitalization, intensive care unit (ICU) admission, mechanical ventilation, or extracorporeal membrane oxygenation (ECMO), or illness that results in death. Although the absolute risk is low, compared with non-pregnant symptomatic people, symptomatic pregnant people have more than a two-fold increased risk of requiring ICU admission, invasive ventilation, and ECMO, and a 70% increased risk of death. Pregnant people with COVID-19 are also at increased risk for preterm birth and some data suggest an increased risk for other adverse pregnancy complications and outcomes, such as preeclampsia, coagulopathy, and stillbirth, compared with pregnant people without COVID-19.7-10 Neonates born to people with COVID-19 are also at increased risk for admission to the neonatal ICU.9-11 In addition, although rare, pregnant people with COVID-19 can transmit infection to their neonates; among neonates born to women with COVID-19 during pregnancy, 1–4% of neonates tested were positive by rRT-PCR.12,13

Recommendations

CDC recommends urgent action to help protect pregnant people and their fetuses/infants. CDC recommends urgent action to accelerate primary vaccination for people who are pregnant, recently pregnant (including those who are lactating), who are trying to get pregnant now, or who might become pregnant in the future. Efforts should specifically address populations with lower vaccination coverage and use approaches to reduce racial and ethnic disparities. CDC recommends ensuring tailored, culturally responsive, and linguistically appropriate communication of vaccination benefits. In addition, pregnant people should continue to follow all recommended prevention measures and should seek care immediately for any symptoms of COVID-19. Healthcare providers should have a low threshold for increased monitoring during pregnancy due to the risk of severe illness.

Recommendations for Public Health Jurisdictions

- Continue and increase efforts to reach and partner with communities to encourage and offer vaccination to people who are pregnant, recently pregnant (including those who are lactating), who are trying to get pregnant now, or who might become pregnant in the future.
- Leverage resources to promote vaccine equity: <u>COVID-19 Vaccine Equity for Racial and Ethnic Minority Groups.</u>
 - Include focused efforts to increase vaccination coverage in pregnancy among people from racial and ethnic minority groups.
- Encourage healthcare providers to offer and recommend COVID-19 vaccination to their patients and community members who are pregnant, recently pregnant (including those who are lactating), who are trying to get pregnant now, or who might become pregnant in the future.
- Work with community partners and employers to make vaccination easily accessible for unvaccinated populations, including those who are pregnant, recently pregnant (including those who are lactating), who are trying to get pregnant now, or who might become pregnant in the future.
- Continue to implement additional <u>prevention strategies</u> where SARS-CoV-2 transmission is high and vaccination coverage is low, including in groups at increased risk, such as pregnant people.
- Continue to monitor community transmission and vaccination coverage levels and focus vaccine efforts on populations with low coverage.
- Disseminate and communicate information to key partners about vaccination coverage, risks
 posed by the highly transmissible Delta variant, and local transmission levels. Partner and share
 messaging with programs serving pregnant and recently pregnant people.

 Communicate accurate information about COVID-19 vaccines, respond to gaps in information, and confront <u>misinformation</u> with evidence-based messaging from credible sources. For example, there is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men.

Recommendations for Healthcare Providers

- Ensure all clinical staff are aware of the recommendation for vaccination of people before and during pregnancy and the serious risks of COVID-19 to pregnant and recently pregnant people and their fetuses/infants.
- Increase outreach efforts to encourage, recommend, and offer vaccination to people who are
 pregnant, recently pregnant (including those who are lactating), who are trying to get pregnant
 now, or who might become pregnant in the future. A strong recommendation from a healthcare
 provider is a critical factor in COVID-19 vaccine acceptance and can make a meaningful
 difference to protect the health of pregnant and recently pregnant people and their fetuses/infants
 from COVID-19.
- For healthcare providers who see patients who are pregnant, recently pregnant (including those
 who are lactating), who are trying to get pregnant now, or who might become pregnant in the
 future:
 - Review patients' COVID-19 vaccination status at each pre- and post-natal visit and discuss COVID-19 vaccination with those who are unvaccinated.
 - Reach out to your patients with messages encouraging and recommending the critical need for vaccination.
 - Remind patients that vaccination is recommended even for those with prior COVID-19 infections. Studies have shown that vaccination provides increased protection in people who have recovered from COVID-19.
 - Support efforts to ensure people receiving the first dose of an mRNA COVID-19 vaccine (i.e., Pfizer-BioNTech, Moderna) return for their second dose to complete the series as close as possible to the recommended interval.
 - Consider a booster dose in eligible pregnant persons.⁴
 - Communicate accurate information about COVID-19 vaccines and confront <u>misinformation</u> with evidence-based messaging from credible sources. For example, there is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men.
- Become a COVID-19 vaccine provider and vaccinate patients during their visit. More information can be found at How to Enroll as a COVID-19 Vaccination Provider.

For More Information

- Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States
- COVID-19 Vaccines While Pregnant or Breastfeeding
- COVID-19 Vaccines for People Who Would Like to Have a Baby
- COVID-19 among Pregnant and Recently Pregnant People
- COVID Data Tracker
 - o <u>Vaccination Among Pregnant People</u>
 - o Data on COVID-19 during Pregnancy: Severity of Maternal Illness
- Toolkit for Pregnant People and New Parents
- Building Confidence in COVID-19 Vaccines

References

- COVID Data Tracker. <u>Data on COVID-19 during Pregnancy: Severity of Maternal Illness</u>. (accessed September 27, 2021)
- 2. COVID-19-Associated Hospitalization Surveillance Network (COVID-NET) (unpublished data)
- 3. COVID Data Tracker. Vaccinations Among Pregnant People. (accessed September 27, 2021)
- **4.** <u>CDC Interim Clinical Considerations for Use of COVID-19 Vaccines</u>. (accessed September 27, 2021)
- Razzaghi H, et al. COVID-19 Vaccination Coverage Among Pregnant Women During Pregnancy
 — Eight Integrated Health Care Organizations, United States, December 14, 2020–May 8, 2021.

 MMWR. 2021:70(24);895–899.
- Zambrano L, et al. <u>Update: Characteristics of Symptomatic Women of Reproductive Age with Laboratory-Confirmed SARS-CoV-2 Infection by Pregnancy Status United States, January 22—October 3, 2020. MMWR.</u> 2020:69(44);1641–1647.
- Ko JY, DeSisto CL, Regina M Simeone RM, et al. <u>Adverse Pregnancy Outcomes, Maternal Complications</u>, and <u>Severe Illness Among US Delivery Hospitalizations With and Without a Coronavirus Disease 2019 (COVID-19) Diagnosis</u>. *Clinical Infectious Diseases*. 2021;73(Supplement 1):S24–S31.
- Jering KS, Clagget BL, Cunningham JW, et al. <u>Clinical Characteristics and Outcomes of Hospitalized Women Giving Birth With and Without COVID-19</u>. JAMA Intern Med. 2021;181(5):714-717. doi:10.1001/jamainternmed.2020.9241
- Allotey J, et al. <u>Clinical manifestations</u>, risk factors, and maternal and perinatal outcomes of coronavirus disease 2019 in pregnancy: living systematic review and meta-analysis. *BMJ* 2020;370:m3320. (Published 01 September 2020)
- Villar J, et al. <u>Maternal and Neonatal Morbidity and Mortality Among Pregnant Women With and Without COVID-19 Infection: The INTERCOVID Multinational Cohort Study</u>. *JAMA Pediatr*. 2021;175(8):817-826. doi:10.1001/jamapediatrics.2021.1050.
- Woodworth KR, et al. <u>Birth and Infant Outcomes Following Laboratory-Confirmed SARS-CoV-2 Infection in Pregnancy SET-NET, 16 Jurisdictions, March 29–October 14, 2020</u>. <u>MMWR</u>. 2020:69(44);1635–1640.
- **12.** Olsen EO, et al. <u>SARS-CoV-2 infections among neonates born to women with SARS-CoV-2 infection: maternal, pregnancy and birth characteristics. (pre-print accessed September 27, 2021)</u>
- 13. Mullins E, Hudak ML, Banerjee J, et al. PAN-COVID and AAP-SONPM registries. Ultrasound Obstet Gynecol. 2021;57(4):573-581. doi:10.1002/uog.23619

The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations.

Categories of Health Alert Network messages:

Health Alert Requires immediate action or attention, highest level of importance

Health Advisory May not require immediate action; provides important information for a specific incident or situation **Health Update** Unlikely to require immediate action; provides updated information regarding an incident or situation **HAN Info Service** Does not require immediate action; provides general public health information

##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, epidemiologists, HAN coordinators, and clinician organizations##