

2021 vaccination during pregnancy

guide for healthcare professionals



IMMUNISATION
COALITION

BE AN ADVOCATE FOR VACCINATION

GPs, obstetricians and midwives play a key role in having fact-based conversations with pregnant women to discuss the benefits and concerns, as well as the best timing of for vaccinations.

Influenza, pertussis (whooping cough), and COVID-19 are serious illnesses that can affect both mother and baby.

Influenza, pertussis and COVID-19 vaccination can help keep mothers and babies healthy and protect the newborn in the first 6 months of life.

92%

92% of women **would accept vaccination** if they knew it was nationally approved and free, and offered by a midwife or GP during pregnancy.

Women **not vaccinated** during pregnancy should be vaccinated as soon as possible after delivery.

86%

86% of pregnant women believe they **should be vaccinated** when pregnant.

The **COVID-19 vaccine can be given** at any stage of pregnancy.

The influenza vaccine is nationally **approved and free** for pregnant women.

Pertussis vaccine is **recommended** during pregnancy at 20-32 weeks.

COVID-19 Vaccination During Pregnancy

Pfizer or Moderna COVID-19 vaccines are recommended for pregnant women at any stage of pregnancy. If Pfizer or Moderna are not available, AstraZeneca can be considered if the benefits to the individual outweigh the potential risks.

Pfizer can be given as two doses 3-6 weeks apart and Moderna can be given as two doses 4-6 weeks apart.

Results from a vaccination program in pregnant women in Israel show that the Pfizer COVID-19 vaccine is effective in preventing COVID-19 in pregnant women. Research shows that antibodies produced during vaccination cross the placenta and may provide some protection to newborn babies.

There is evidence from other countries to show that the Pfizer COVID-19 and the Moderna COVID-19 vaccines are safe in pregnant women.

A US study of more than 35,000 pregnant women showed that the side effects after vaccination in pregnant and non-pregnant women were similar. The possible side effects include pain at the injection site, tiredness, fever, headache, muscle and joint pain, chills and diarrhoea.

COVID-19: What You Need to Know

COVID-19 can cause harm to pregnant women and their babies. When compared to pregnant women without COVID-19, pregnant women with COVID-19 are:

- > Five times more likely to be hospitalised
- > Up to three times more likely to be admitted to ICU and
- > Three times more likely to need a ventilator

When compared to the babies of pregnant women without COVID-19, the babies of pregnant women with COVID-19 are:

- > One and a half times more likely to be born prematurely
- > Three times more likely to be admitted to a hospital newborn care unit
- > More likely to be stillborn
- > More likely to experience distress during birth



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vaccination protects the mother and baby

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Influenza Vaccination During Pregnancy

Influenza is a potentially severe disease that can affect mother and baby. It can affect the mother in the second and third trimesters and the baby in the first few months after birth, even causing death.

In Australia it is estimated that more than 3000 people have died every year of influenza and tens of thousands have been hospitalised due to influenza and its complications. Considerable decreases in influenza have been reported since April 2020 due to the COVID-19 epidemic in Australia. Physical distancing, travel restrictions, emphasis on hygiene, changes in testing priorities and diversion of resources to the COVID-19 response may all have affected numbers.

Pregnant women bear a disproportionate burden from influenza infection. This may be because the immune system is naturally suppressed during pregnancy which leads to an increased chance of contracting influenza.

Additionally, pregnant women have an increased risk of severe complications: stillbirth, premature birth and suboptimal foetal growth. Influenza vaccination protects against these three complications.

Although vaccination rates have recently increased, pregnant women seem to underestimate the risk to the unborn baby – especially from influenza. Not enough mothers understand that the baby cannot be vaccinated against influenza in the first 6 months of life.

Influenza: What You Need to Know

- Multiple studies show that influenza vaccine at any stage of pregnancy is associated with a 20% reduction in risk of stillbirth.
- The influenza vaccine is nationally approved and free for pregnant women.

Vaccinating pregnant women against influenza gives a three for one benefit:

- Protects the mum during pregnancy and in the early months of motherhood
- Protects the unborn baby by trans-placental antibodies
- Protects the young infant by antibodies in breast milk.



Pertussis Vaccination During Pregnancy

Pertussis is a highly infectious bacterial disease that causes severe bouts of coughing. In adults, the symptoms can be mild, but for a baby who is not yet vaccinated, it can be life threatening.

Vaccination during pregnancy (preferably at 20-32 weeks) means the body produces antibodies that are passed on to the baby before birth.

Studies have found that pertussis vaccination during pregnancy is safe and effective for both mother and baby. These antibodies will protect the baby until they are able to receive their own vaccination at 6 weeks of age.

Studies from the US and UK involving more than 40,000 pregnant women found only mild side effects such as pain or redness in the arm where the vaccination was given. It does not increase the risk of serious pregnancy complications such as premature birth.

The National Health and Medical Research Council (NHMRC) has recently updated recommendations for pregnant women to be vaccinated in their mid 2nd trimester and early 3rd trimester (ideally at 20-32 weeks).

Pertussis: What You Need to Know

- The pertussis vaccine (dTpa) is nationally approved and free for pregnant women.
- dTpa vaccine is recommended during the mid 2nd trimester and early 3rd trimester (ideally at 20-32 weeks) but can be given at any time in the third trimester.
- Studies show no increased risk of adverse pregnancy outcomes related to pertussis vaccination during pregnancy, such as stillbirth, foetal distress or low birth weight.

