

SOGC (Society of Obstetrics and Gynaecologist of Canada) Statement on COVID-19 Vaccination in Pregnancy (Updated March 12, 2021)

**Consensus Statement: Patients who are pregnant or breastfeeding should be offered vaccination at any time if they are eligible, and no contraindications exist.**

This decision is based on the women's personal values and an understanding that the risk of infection and/or morbidity from COVID-19 outweighs the theorized and undescribed risk of being vaccinated during pregnancy or while breastfeeding. Women should not be precluded from vaccination based on pregnancy status or breastfeeding.

**Key Messages**

- Expert opinion suggests mRNA vaccines are unlikely to pose a risk to patients who may be pregnant, are pregnant or breastfeeding, or to their unborn babies or breastfed infants. This is because mRNA vaccines are not live virus vaccines, nor are they genetic therapy.
- Vaccines currently available have not been tested on individuals who may be pregnant, are pregnant, or are breastfeeding.
- Pregnant patients with COVID-19 infection are at higher risk of hospitalization and admission to the ICU than non-pregnant patients of the same age.
- Individuals who may be pregnant, are pregnant or are breastfeeding have the right to receive the vaccine, should they choose to do so when it is offered in the overall vaccine sequencing.
- Individual counselling with a clinician regarding vaccination in pregnancy is recommended. However, this is not a requirement before vaccination.
- There is a biologically plausible benefit to breastfeeding after vaccination: IgG antibodies can be detected in breastmilk within 5-7 days. The maternal antibodies and T-cells stimulated by the vaccine could transfer into the breastmilk providing passive immunity to the infant against COVID-19 infection.

**Vaccination – the basics**

- COVID-19 vaccination consists of TWO Intramuscular injections, up to 42 days apart
- Most common side effects include:
- Pain at the injection site, fatigue, headache
- Fever noted in 11-16% after the second dose
- Acetaminophen can be used as needed to treat side effects

**Please do not hesitate to speak with your care provider at your next appointment if you have any questions or concerns.**

## References

1. SOGC Statement on COVID-19 Vaccination in Pregnancy. <https://sogc.org/en/-COVID19/en/content/COVID-19/COVID-19.aspx?hkey=4e808c0d-555f-4714-8a4a-348b547dc268>  
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2. CDC MMWR: Recommendations for the use of Pfizer-BioNTech COVID-19 Vaccine. [https://www.cdc.gov/mmwr/volumes/69/wr/mm6950e2.htm?s\\_cid=mm6950e2\\_e&ACSTrackingID=USCDC\\_921-DM44546&ACSTrackingLabel=MMWR%20Early%20Release%20-%20Vol.%2069%2C%20December%2013%2C%202020&deliveryName=USCDC\\_921-DM44546](https://www.cdc.gov/mmwr/volumes/69/wr/mm6950e2.htm?s_cid=mm6950e2_e&ACSTrackingID=USCDC_921-DM44546&ACSTrackingLabel=MMWR%20Early%20Release%20-%20Vol.%2069%2C%20December%2013%2C%202020&deliveryName=USCDC_921-DM44546)
3. CDC MMWR: Recommendations for the use of Moderna COVID-19 Vaccine. [https://www.cdc.gov/mmwr/volumes/69/wr/mm695152e1.htm?s\\_cid=mm695152e1\\_e&ACSTrackingID=USCDC\\_921-DM45179&ACSTrackingLabel=MMWR%20Early%20Release%20-%20Vol.%2069%2C%20December%2020%2C%202020&deliveryName=USCDC\\_921-DM45179](https://www.cdc.gov/mmwr/volumes/69/wr/mm695152e1.htm?s_cid=mm695152e1_e&ACSTrackingID=USCDC_921-DM45179&ACSTrackingLabel=MMWR%20Early%20Release%20-%20Vol.%2069%2C%20December%2020%2C%202020&deliveryName=USCDC_921-DM45179)
4. CDC Interim Clinical Considerations for the use of mRNA COVID-19 Vaccines Currently Authorized in the USA. <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinicalconsiderations.html>
5. Academy of Breastfeeding Medicine: Considerations for COVID-19 Vaccination in Lactation. <https://abm.memberclicks.net/abm-memberclicks.net/abm-statement-considerations-for-covid-19-vaccination-in-lactation>
6. Alberta COVID-19 Vaccination in pregnancy Fact Sheet <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-alberta-covid-19-vaccination-in-pregnancy-factsheet-for-practitioners.pdf>