

COVID-19

Frequently Asked Questions – 7 April 2020

Maternity Patients

This is a changing landscape and this guidance will be updated as appropriate. Please refer to [SA Health Website](#) for the most up to date information.

What is COVID-19?

Coronaviruses are a large family of viruses that can cause respiratory infections. This can range from the common cold to more serious diseases such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). COVID-19 is the name of the disease caused by a new coronavirus that originated in Hubei Province, China.

This is a rapidly evolving situation which is being monitored carefully.

How is it spread?

COVID-19 is mostly likely spread through:

- > direct close contact with a person while they are infectious (usually face to face contact for at least 15 minutes; or being in the same closed space for at least 2 hours);
- > contact with droplets from an infected person's cough or sneeze.

COVID-19 may also spread through:

- > touching objects or surfaces (like doorknobs or tables, mobile phones, stair rails, elevator buttons) that have droplets from a cough or sneeze of an infected person, and then touching your mouth, nose, eyes or face.



For more information

Women's and Babies Division
 Women's and Children's Hospital
 72 King William Rd, North Adelaide SA 5006
 Telephone (08) 8161 7000



www.ausgoal.gov.au/creative-commons

What are the symptoms?

The symptoms of this new coronavirus (COVID-19) include cough, fever, shortness of breath, or flu-like symptoms. The current evidence is that most cases appear to be mild, but severe cases can occur, particularly in the elderly or immune compromised.

Should we be wearing face masks to protect ourselves from infection?

Face masks play a very important role in clinical settings, such as hospitals but there is very little evidence of widespread benefit from their use outside of these clinical settings.

Face masks must be worn correctly, changed frequently, removed properly and disposed of safely in order to be effective.

Will COVID-19 affect my pregnancy?

As COVID-19 is a new illness there is little detailed information about the impact of the virus on pregnant women and their babies.

Experience with other viruses in this family suggests that while pregnant women may develop severe respiratory symptoms, pregnant women do not appear to be more severely unwell if they develop COVID-19 infection than others in the general population.

In fact, the large majority of pregnant women will experience only mild or moderate cold/flu type symptoms.



Government
of South Australia

Women's and Children's
Health Network



Women's
& Children's
Hospital

How will this impact my birth plan?

For many women, there will be no changes to the way you plan to give birth.

However, the Women's and Children's Hospital is enforcing a one visitor per patient policy to reduce the risk of exposure, which will mean you will only be able to have one birthing partner.

There is no evidence that caesarean section or induction of labour is necessary to reduce the risk of transmission to your baby.

You should still approach this extraordinary time in your life without fear or apprehension.

Medical intervention, other than that specifically related to infection control, will not change significantly.

You can still practise active mobilisation, water immersion and will have access to pain relief if you would like.

Can I pass on COVID-19 to my unborn baby?

There is no evidence at this stage that the virus can pass to your developing baby while you are pregnant, or that the virus will cause abnormalities in your baby.

Will COVID-19 affect my ability to conceive?

For women who are trying to conceive, or who are in early pregnancy, there is no evidence to suggest an increased risk of miscarriage with COVID-19.

Does COVID-19 cause premature birth?

Some babies born to women with symptoms of COVID-19 in China have been born prematurely.

It is unclear whether this was due to the illness, or the doctors made the decision for the baby to be born early because the woman was unwell.

Newborn babies and infants do not appear to be at increased risk of complications from the infection.

How will this impact my antenatal care?

Routine antenatal investigations, ultrasounds, maternal and fetal assessments should continue as before.

The WCH may implement some changes to how these appointments are delivered, where possible, to reduce the risk of exposure.

This includes using telehealth consultations, limiting the time of antenatal visits, and cancelling face to face antenatal classes.

Pregnant women are also advised to continue with the recommended immunisation schedule including whooping cough and influenza vaccination.

Can I still breast feed if I have COVID-19?

Yes. Women who wish to breastfeed their babies should be encouraged and supported to do so.

At the moment there is no evidence that the virus is carried in breastmilk and, therefore, the well-recognised benefits of breastfeeding outweigh any potential risks of transmission of COVID-19 through breastmilk.

I am a pregnant healthcare worker, can I still work?

The Women's and Children's Health Network is following the guidelines from the [Royal Australian and New Zealand College of Obstetrics and Gynaecology](#) in order to support pregnant healthcare workers during the COVID-10 outbreak.



I feel a little unwell, but I'm not sure if it's COVID-19, what should I do?

If you develop cold/flu symptoms (fever, cough, sore throat, nausea, vomiting, diarrhoea, fatigue, difficulty breathing) please arrange an urgent medical review (fever clinic, GP practice, Emergency Department) for consideration of COVID-19 testing.

If you have any of these symptoms, or are required to self-isolate, or are diagnosed with COVID-19, you should notify your healthcare provider to reschedule or delay your appointment.

This will enable you to continue to receive antenatal or postnatal care and reduce the risk to other pregnant patients or health workers.

How do I cope with all this uncertainty?

Pregnancy can be stressful at the best of times, and it's understandable that you might be more worried given the current situation.

If you feel at all overwhelmed or require any further support, seek advice and help from your health professional.

Are elective caesareans impacted by the elective surgery ban?

No. C-sections are exempt from any ban on elective surgery as this procedure is classified as necessary to prevent the loss of life or permanent disability.

What else should I do to protect myself and my unborn baby?

Above all else, if you are pregnant, take care of yourself.

Don't forget the importance of regular hand hygiene, cough etiquette and social distancing.

Take the opportunity to rest, eat well and maintain your interests and hobbies, where possible.

You are the best protection for your baby so caring for yourself, your emotional and physical health, is what is most important.

The dedicated staff here at the WCH are well-trained, world-class, committed and equipped to care for you.

Where can I go for more information?

This document has been developed in line with recommendations from [RANZCOG](#) for all Australian pregnant women.

For general inquiries about COVID-19 you can call the national hotline on 1800 020 080 or visit the dedicated national website.

Seek information from trusted sources, including [SA Health](#), the [Australian Government](#) or the [World Health Organisation](#).

If you need emergency obstetric care, unrelated to COVID-19, the Women's Assessment Service at the WCH is open 24/7.

