



COVID-19 and breastfeeding

Should I have the COVID-19 vaccination if I am breastfeeding?

Yes, COVID-19 vaccination is recommended for women who are breastfeeding.

It is important to know:

- COVID-19 vaccination may protect your baby by transferring antibodies through the placenta (during pregnancy) or through breastmilk (during breastfeeding).
- If you are breastfeeding, it is preferable for you to have a Pfizer or Moderna COVID-19 vaccine. The mRNA COVID-19 vaccines are the preferred vaccines for people aged under 60 years. You do not need to stop breastfeeding after vaccination.

This advice, and the evidence behind it, can be found in the Australian Government's [Shared decision making guide for women who are pregnant, breastfeeding or planning pregnancy](#)

If you have COVID-19, can you breastfeed?

Yes. If you want to breastfeed, this will be supported. There is no evidence that COVID-19 can be passed on to your baby in breast milk, and the benefits of breastfeeding and the protection it offers outweigh any possible risks.

Breastmilk is best for almost all babies. Breastfeeding helps you and your baby bond together. It also helps protect your baby against infection.

Your decision to breastfeed may involve thinking about your baby's health, how sick you are and whether you are well enough to care for your baby. Your healthcare team will discuss your individual situation and feeding options with you.

What is advised about breastfeeding with other infections?

In general, breastfeeding helps protect against many illnesses. For example, when a mother has the flu, breastfeeding is still encouraged with extra care to avoid spreading the virus to her baby.

Can your baby get COVID-19 from breastfeeding?

The COVID-19 virus has not been found in breastmilk. However, COVID-19 is easily passed from person to person through close contact. You should take additional precautions while in close contact with your baby, (as you do for other infections).

What precautions should you take when looking after your baby?

If you have COVID-19, it is important to do everything you can to prevent your baby getting the virus, even if you don't have symptoms.

It is very important that you:

- get vaccinated
- wash your hands before and after touching your baby using soap and water for 20 seconds or alcohol-based hand rub
- routinely clean and disinfect surfaces you have touched
- wear a mask while in close contact including while breastfeeding
- where possible use social distancing at home and in hospital
- have a healthy adult assist you to care for your baby where possible.

Can your baby be fed expressed breast milk?

Feeding your expressed breastmilk (EBM) to your baby is strongly supported. If you decide to feed your baby EBM, you will also need to think about:

- your health and your baby's health
- where your baby is located
- who is looking after your baby?

Your healthcare team will discuss with you how they can support you and your feeding choices.

What precautions should you take with expressed breast milk?

- Wash your hands prior to touching the pump or bottle parts.
- Clean the pump and all its parts, and the bottle carefully after each use.
- If you are unwell, have a healthy caregiver feed the expressed breast milk to your baby where possible
- Remind other caregivers to wash their hands using soap and water for 20 seconds or alcohol-based hand rub before and after touching your baby.

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COVID-19 in pregnancy

What is COVID-19 and coronavirus?

Coronavirus Disease 2019 (COVID-19) is caused by SARS-CoV-2 and is easily passed from person to person. In most people with good health, COVID-19 is mild, however pregnant women are considered an at-risk group. Pregnant women are not more likely to get COVID-19 but if they become infected with COVID-19, there is a higher risk of severe illness from COVID-19 and pregnancy complications such as stillbirth and premature birth.

How will COVID-19 affect you?

Pregnant women who become infected with COVID-19 have a higher risk of some complications, which may include:

- needing admission to hospital,
- an increased risk of needing admission to an intensive care unit
- an increased risk of needing breathing life support.

Some pregnant women are more likely to have severe illness from COVID-19, particularly if they:

- are older than 35 years
- are overweight or obese
- have pre-existing (pre-pregnancy) high blood pressure
- have pre-existing (pre-pregnancy) diabetes (type 1 or type 2)
- smoke
- have a heart or lung condition such as asthma.

For more information about the risks of COVID-19 in pregnancy see the Australian Government's [COVID-19 vaccination – Shared decision making guide for women who are pregnant, breastfeeding or planning a pregnancy](#)

How will COVID-19 affect your baby?

The risk of infection passing from mother to baby during pregnancy is thought to be low. So far, the virus has not been shown to pass from the mother to her baby before birth (this is called vertical transmission).

Some babies born to women with COVID-19 infection have been born early (prematurely). In most cases doctors advised that the baby should be born early because the mother was very unwell and requiring intensive care treatment.

Your maternity care provider will ensure that an appropriate plan of care is discussed with you. This may include a scan to monitor your baby's growth during and following your recovery from COVID-19. It is important that if you have any concerns about your pregnancy or baby that you contact your maternity care provider as early as possible.

If you have a high fever at any stage of your pregnancy call your healthcare provider or the **COVID Hotline 13 268 43**.

Should I have the COVID-19 vaccination if I am pregnant or planning a pregnancy?

Yes, COVID-19 vaccination is recommended for women who are pregnant, breastfeeding or planning a pregnancy.

It is important to know:

- Pregnant women are not more likely to get COVID-19 but if they become infected with COVID-19, there is a higher risk of severe illness from COVID-19 and pregnancy complications like preterm birth.
- COVID-19 vaccination may provide indirect protection to babies by transferring antibodies through the placenta (during pregnancy) or through breastmilk (during breastfeeding).

The Australian Technical Advisory Group on Immunisation (ATAGI) and the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) recommended that pregnant women of all ages receive the Pfizer or Moderna COVID-19 vaccines at any stage of pregnancy.

Pregnant women who received a first dose of AstraZeneca COVID-19 vaccine can receive either an mRNA COVID-19 vaccine (Pfizer or Moderna COVID-19 vaccines) or the AstraZeneca COVID-19 vaccine for their second dose, although an mRNA vaccine is preferred.

Pregnant women are a priority group for COVID-19 vaccination with these mRNA vaccines and are encouraged to discuss the decision in relation to timing of vaccination with their health professional. Women who are trying to become pregnant do not need to delay vaccination or avoid becoming pregnant after vaccination.

If you are pregnant or breastfeeding and have completed your primary 2-dose vaccination, it is recommended to have a booster four months after your primary dose.

Is it safe to come to hospital?

It is safe for you to come to hospital for antenatal clinic appointments. It is important to stay connected with your maternity care provider/s involved in your pregnancy and to contact them if you are worried about anything.

It is also important that you have all the usual tests, vaccinations and check-ups required during pregnancy.

Your maternity care provider will plan your care with you. Some of your appointments may be offered virtually using either phone or video. If you or your maternity care provider identifies any risks or concerns, then face to face appointments may be required and will be arranged with you.

Access to routine antenatal investigations, ultrasounds, maternal and fetal assessments can happen outside the hospital antenatal clinic. Your maternity care provider may make alternative arrangements for your care which may include being seen by your GP in the community or by a maternity care provider in your home.

Can COVID-19 be prevented or cured?

There is no cure, however vaccinations to reduce the severity of the disease are available. Other things you can do to reduce your chance of getting the infection include:

- Wearing a mask in public places
- washing your hands regularly and frequently—use soap and water for at least 20 seconds or an alcohol-based hand sanitiser/gel
- using social distancing (stay 1.5 metres away from other people)
- avoiding anyone who has a fever, cough or symptoms of a cold or chest infection
- avoiding touching your eyes, nose and mouth
- stay home and get tested if you have any symptoms of COVID-19, however mild.

If you are unwell:

- telephone your healthcare provider as soon as possible
- take paracetamol for fever or pain, as per instructions on the packaging (avoid medications that contain ibuprofen if possible)
- rest and drink plenty of water.

What if you or your family has COVID-19?

If you think you or a family member might have COVID-19, access the [Coronavirus Symptom Checker](#), call your general practitioner (GP), **COVID Hotline 13 268 43**, or the National Coronavirus Helpline 1800 020 080.

When should you get tested for COVID-19 and self-isolate?

You may be required to get tested for COVID-19 and/or to self-isolate if you have:

- Tested positive for COVID-19, been tested for COVID-19 and are awaiting your result or have been identified as a close contact of a confirmed case of COVID-19. The [COVID-19 Coronavirus: Testing and isolation guide](#) provides further directions.
- Arrived into WA from overseas. Further information is available from the COVID-19 coronavirus: International travel webpage.
- Arrived into WA from a state or territory. Further information is available from the [COVID-19 coronavirus: Interstate travel](#) webpage.

How do you self-isolate?

If you have been advised to self-isolate, stay indoors and avoid contact with others.

This means:

- not going to school, work or public areas
- not using public transport
- staying at home and not bringing visitors to your home
- ventilate rooms by opening windows
- sleeping apart, where possible
- using your own linen
- using your own cutlery and utensils
- separating yourself from other members of the household, where possible

- increasing cleaning of shared areas.

Can you come to antenatal appointments if in self-isolation?

Contact your healthcare provider or hospital to:

- inform them that you are currently in self-isolation for suspected or confirmed COVID-19
- request advice on attending routine antenatal appointments.

What if you feel unwell or are worried during self-isolation?

If you begin to feel unwell (have a fever or shortness of breath, cough or a respiratory illness) while in self-isolation seek immediate medical attention. Call ahead to your general practitioner (GP) or emergency department and tell them about your situation before you arrive.

What if I go into labour during self-isolation?

If you go into labour, call the hospital, or your healthcare provider. Tell them that you are in self-isolation due to COVID-19. They will tell you what to do, and when and how to come to hospital.

If the suggested transport is by ambulance, call for an ambulance by dialling 000. Let the call taker at St John Ambulance WA know you are in labour and in self-isolation.

Will COVID-19 affect your birth plan?

Having COVID-19 will not by itself affect how your baby is born. If you are booked for an induction of labour or caesarean section, and have COVID-19, notify your health care provider immediately to discuss a plan.

There is no evidence that women with COVID-19 cannot have an epidural or use nitrous oxide. This will be discussed with you.

Continuous monitoring of your baby in labour is recommended (but is not compulsory). This is because some babies (whose mothers had COVID-19) showed signs of distress during labour. Monitoring can help detect problems as early as possible. This recommendation is the same as for other infections in pregnancy. Talk to your healthcare provider about any concerns you may have.

Your maternity care providers will provide you with support and care during your labour and birth.

Maternity care providers caring for you will wear personal protective equipment (such as a face mask, face shield, gloves and apron/gown).

We recognise the importance of having a partner /support person to participate in your care. You can have one nominated partner/ support person with you during labour and birth, to act as a participant in care.

You will be asked to nominate a participant in care who should not have suspected or confirmed COVID-19 and not be a close or casual contact waiting for test results. The person you choose to be your participant in care should consider their own individual health risk factors including their own COVID-19 vaccination status.

The participant in care will have to wear personal protective equipment. The staff will provide guidance on how to wear the equipment.

Because you have COVID-19, your participant in care will become a close contact and will need to get tested and self-isolate after the birth.

Will having COVID-19 affect contact with my baby?

In most cases keeping a mother and baby together is best. If either of you are very unwell this may not be possible. Your healthcare provider will talk with you about what you want and what your choices are. If you are very unwell, one option may be for your baby to go home with a well adult (e.g. well partner or relative).

If you have or may have COVID-19 it is important to do everything you can to prevent your baby getting the virus, even if you don't have symptoms. It is very important that you:

- get vaccinated
- wash your hands before and after touching your baby-use soap and water for at least 20 seconds or an alcohol-based hand sanitiser/gel
- routinely clean and disinfect surfaces you have touched
- have a healthy adult assist you to care for your baby where possible
- wear a mask while in close contact with your baby, including while feeding.

A small number of babies may develop mild or moderate symptoms in the weeks following birth and some may require additional hospital care. If your baby becomes unwell following birth, contact your GP or hospital. Call ahead and advise them you have/had COVID-19.

Will your baby be tested for COVID-19?

The need for testing your baby will be determined by the symptoms your baby has. In general, well babies will not be tested.

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Information for COVID-19 women in labour

As a woman in labour, you have the right to a safe and positive birth experience.

If you are a probable or confirmed COVID-19 case:

- you will be asked to wear a mask
- you will still be able to move in labour and birth to the position of your choice, but you will not be able to have a water birth
- you will have access to a range of pain relief options including an early epidural
- your baby's heart rate will be continuously monitored in labour
- you will be assisted with respiratory and hand hygiene prior to holding your baby.

Care Providers

Your maternity care providers will provide you with support and care during your labour and birth.

Maternity care providers caring for you will wear personal protective equipment (such as a face mask, face shield, gloves and apron/gown).

Support person

- We recognise the importance of having a partner /support person to participate in your care. You will be asked to nominate a participant in care who should not be a probable or confirmed COVID-19 case and not be a contact waiting for test results.
- You can have one nominated partner/ support person with you during labour and birth, to act as a participant in care.
- The person you choose to be your participant in care should consider their own individual health risk factors including their own COVID-19 vaccination status.
- The participant in care will have to wear personal protective equipment. The staff will provide guidance on how to wear the equipment.
- If your participant in care has a mask exemption, is unvaccinated or has a vaccination exemption they will be accompanied/escorted to your room, allowed to solely visit you and no other hospital area, required to maintain social distancing and IPC measures
- Because you have COVID-19, your participant in care will likely become a close contact and will need to get tested and self-isolate after the birth.
- If your participant in care is a probable or confirmed case of COVID-19 they can have planned visits only with discussion with the IPC team and an approved IPC plan in place that includes education on donning and doffing PPE.
- Further information can be found in the [COVID-19 Public hospital visitor guidelines \(health.wa.gov.au\)](https://www.health.wa.gov.au/COVID-19-Public-hospital-visitor-guidelines)

If you have any concerns or questions, contact your maternity care provider.

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