Objective: COVID-19 is now prevalent in our community, and the goal of the UWMC Mother/Baby Unit is to provide superior care and prevent risk of infection and/or transmission of the virus on our units.

Talking Points

- It’s unclear whether there is transmission from mom to infant during birth but there are a few anecdotal cases of this. We do know the infant is at risk of infection after birth from respiratory transmission from mom which can occur from proximity and handling of the infant.

- Currently the CDC recommends separation of mom and infant in order to protect the infant from infection (https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/pregnancy-guidance-breastfeeding.html). We have consulted our Seattle Children’s Infectious Disease Specialists as well as the American Academy of Pediatrics who both recommend separation as well.

- Recent data show that infants < 1 year of age have more severe disease than older children(https://pediatrics.aappublications.org/content/pediatrics/early/2020/03/16/peds.2020-0702.full.pdf). Therefore, we are concerned about protecting these infants to the greatest extent possible.

- At this time, COVID-19 has not been found in breastmilk but confirmatory studies are still pending. Breastmilk confers immunity as well as important nutrients for the infant. Therefore, we recommend giving breast milk to your infant. We will help you express and pump milk that we will give to the infant.

- We will not test infants immediately after birth because the incubation period is 2-14 days so a negative test in the immediate period would not rule out later disease. Infants will only be tested if they develop symptoms.

Background Information:

1. At this time, there is a paucity of data on vertical transmission to infants during delivery. While the two preliminary publications below support no vertical transmission, we are hearing about unpublished data from ID physicians that suggests vertical transmission is possible. (https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30360-3/fulltext) (https://www.frontiersin.org/articles/10.3389/fped.2020.00104/full).
2. There is currently no evidence of COVID-19 in breastmilk but confirmatory studies have not been done – only preliminary ones. Similar viruses (SARS) have not been found in breastmilk.

3. A study of children (published Feb 14, 2020) with the virus who had an affected family member showed that none of the infants required ICU care and most had mild symptoms if any at all. [https://jamanetwork.com/journals/jama/fullarticle/2761659](https://jamanetwork.com/journals/jama/fullarticle/2761659). More recent data preliminarily suggest that infants less than 1yr may be at highest risk of more significant disease compared to older kids, but in this study, only about 1/3 of cases were confirmed coronavirus cases (the others could have been RSV or other disease).

4. The CDC website is constantly evolving with new information: [https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/pregnancy-guidance-breastfeeding.html](https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/pregnancy-guidance-breastfeeding.html). Current guidance is to recommend separation of mom and infant. The AAP will soon release guidance that affirms these same recommendations. At this time, we are recommending separation of mom and infant for any COVID+ or PUI mom. PUI is currently defined as fever, cough, SOB, muscle ache, or sore throat (it is very broad). For a mom that is PUI, OB will test mom as soon as possible and if a negative test is obtained, the infant will be reunited with mom.