Top tips

COVID-19 vaccination in pregnancy and breastfeeding

Dr. Amy Tatham GPwER in gynaecology Bradford

This resource has been produced on behalf of the PCWHS. It is for guidance only; healthcare professionals should use their own judgment when applying it to patient care.



1) COVID-19 hasn't gone away.

- Even with greatly reduced testing, there are still over 1,000 confirmed cases of COVID-19 in England every week¹.
- The commonest symptoms are cough, fever, sore throat, dyspnoes, myalgia and loss of sense of taste².
- Pregnant women are as likely to contract COVID-19 as the general population³.
- 2/3 of pregnant women with COVID-19 are asymptomatic3.

2) Pregnancy is a risk factor for admission and serious illness with COVID-19.

- Pregnancy is a risk factor for severe illness, particularly in the third trimester; the risk of death remains low.
- Pregnant women (or up to six weeks postpartum) admitted with suspected or confirmed COVID-19 should be given low molecular weight heparin, unless birth is expected within 12 hours or there is a risk of haemorrhage.
- Other risk factors for pregnant women include:
 - o Being unvaccinated.
 - o Non-Caucasian ethnicity.
 - o Pre-pregnancy comorbidity (e.g. hypertension or diabetes) or BMI >25.
 - o Maternal age ≥35.
 - o Socioeconomic deprivation.
 - o Working in healthcare or another public facing setting.

3) COVID-19 can have serious consequences for the foetus3.

- Maternal COVID-19 infection is associated with an approximately doubled risk of stillbirth, but there is no increased risk of first or second trimester pregnancy loss.
- The premature birth rate in mothers with COVID-19 is 2-3 times the background rate.

4) COVID-19 vaccination is safe in pregnancy and breastfeeding³.

- Pregnant women remain a risk group who are offered the COVID-19 booster.
- Vaccination is the best way to protect women and their babies from the known risks of COVID-19 in pregnancy.
- There is no known risk of teratogenesis from COVID-19 infection or vaccination; COVID-19 vaccination is safe to have when breastfeeding.
- Pregnant women who have two doses of primary vaccination and a booster are 88% less likely to need admission with COVID-19 than those who are unvaccinated.
- There is no evidence that the COVID-19 vaccination affects fertility.
- Minor adverse effects are reported at the same rate as in non-pregnant women.
- The current vaccines do not carry a risk of the rare syndrome of vaccineinduced thrombosis and thrombocytopenia (VITT) that was reported with the Oxford-AstraZeneca and Janssen vaccines.

For more resources, visit www.pcwhs.co.uk

Last updated: April 2025. Date of next review: April 2028.

This guidance was correct at the time of publication. Healthcare professionals are responsible for their own actions and the PCWHS can take no responsibility for decisions made due to the use of this guidance. For further information, or to leave any feedback, please contact admin@pcwhs.co.uk



Resources

- RCOG/RCM information for professionals on COVID-19 and pregnancy.
- RCOG patient information on COVID-19, pregnancy and women's health.
- Green book chapter on COVID-19 vaccination.
- Vaccine knowledge project COVID-19 vaccination.

References

- 1) UKHSA. COVID-19. April 2025.
- 2) NHS. COVID-19 symptoms and what to do. March 2023.
- 3) RCOG/RCM. Coronavirus (COVID-19) Infection in Pregnancy. March 2022.