

**Information sheet and decision aid: Updated 20 August 2021**

**All pregnant women in the UK over the age of 18 have now been offered COVID-19 vaccination. Pregnant women aged 16 and 17 will be offered a COVID-19 vaccine this summer.**

Vaccination is recommended in pregnancy, but the decision whether to have the vaccine is your choice. The information below will help you make an informed choice about whether to get the COVID-19 vaccine if you are pregnant or trying to get pregnant.

### Your options:



Get a COVID-19 vaccine

or



Wait for more information  
about the vaccine in pregnancy

## What are the benefits of the vaccination?

### ✓ COVID-19 may be more dangerous in pregnancy

Studies have shown that hospital admission and severe illness are more common in pregnant women (compared to those not pregnant), especially those in the third trimester of pregnancy, and that stillbirth and preterm birth is more likely (compared to pregnant women without COVID-19). Pregnant women with underlying medical conditions are at higher risk of severe illness.

### ✓ Vaccination is effective in preventing COVID-19 infection

### ✓ You cannot get COVID-19 from vaccination

- COVID-19 vaccines do NOT contain live coronavirus
- Vaccines do NOT contain any additional ingredients that are harmful to pregnant women or their babies
- Other non-live vaccines (whooping cough, influenza) are safe for pregnant women and their unborn babies.

## What are the risks of the vaccination?

### ✗ **The COVID-19 vaccines have not yet been tested specifically in pregnant women.**


- COVID-19 vaccines have been given to large numbers of people to ensure they meet stringent standards of effectiveness and safety.
- Data from the United States, where more than 147,000 pregnant women have had a COVID-19 vaccine (using Pfizer BioNTech or Moderna vaccines), has not raised any safety concerns. 55,000 pregnant women in England and Scotland have also received a COVID-19 vaccine with no adverse effects recorded.
- Future studies in pregnancy will give us more information on how effective the vaccine is in pregnancy, and on pregnancy outcomes after vaccination. There have not been any signals to suggest safety concerns so far.

### ✗ **Side effects from the vaccine are common. These do not affect pregnancy, but may include:**

- injection site reactions (sore arm)
- muscle pain
- fatigue
- fever, chills
- headache
- joint pain

### ✗ **Extremely rare but serious side effects involving thrombosis (blood clots) have been reported for the AstraZeneca vaccine, but this does not seem to be more likely in pregnant than in non-pregnant people. The Pfizer BioNTech or Moderna vaccines should be offered to pregnant women where available as most of the safety monitoring data from the United States relates to these two vaccines.**

? You may wish to discuss COVID-19 vaccination in more detail with your doctor or midwife

 If you decide to have a COVID-19 vaccine, please tell the vaccination team that you are pregnant so that this can be recorded



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## How to decide: COVID-19 vaccination advice for women who are, or may be pregnant

This leaflet is designed to help you make an informed choice about whether to have the COVID-19 vaccine in pregnancy. At present, the COVID-19 vaccine is being offered to all pregnant women over the age of 16. We know that vaccines are effective in preventing COVID-19. Some pregnant women may become seriously unwell with COVID-19 infection, particularly in the later stages of pregnancy. There is emerging data on the safety of COVID-19 vaccines in pregnancy, and no evidence that the vaccines can cause harm to you or your baby.

### What should I do to help me decide?

- Make sure you know as much as you can about the vaccine and the risks of COVID-19 in pregnancy. You can ask your midwife, doctor or an immunisation nurse.
- Look up the information on the [NHS](#), [Public Health England \(PHE\)](#) or [professional](#) websites. Available evidence on the safety of vaccines in pregnancy is published by [UKTIS](#), part of PHE.
- Look at the information below and think about your risk of catching and becoming seriously unwell from COVID-19. Are you able to reduce your chance of being exposed to COVID-19?



### What is known about COVID-19 in pregnancy?

About two-thirds of women who test positive for COVID-19 in pregnancy have no symptoms at all. In the UK, surveillance shows that approximately one in 100 pregnant women who have been admitted to hospital test positive for COVID-19 (although this will change during the stages of the pandemic). One in 10 women admitted to hospital with COVID-19 require intensive care. In the later stages of pregnancy women are at increased risk of becoming seriously unwell with COVID-19. If you have COVID-19 in pregnancy, you are twice as likely to have a stillbirth, and it is twice as likely that your baby will be born prematurely, which can affect their long term health.

Of 742 women admitted to hospital with symptoms of COVID-19 since 1 February 2021, only four had received a single dose of vaccine and none have received both doses. This means that more than 99% of these pregnant women admitted to hospital with symptomatic COVID-19 were unvaccinated.

(Source: <https://www.medrxiv.org/content/10.1101/2021.07.22.21261000v1>).



## **What is known about the effects of COVID-19 vaccination in pregnant women?**

Data from the United States and the UK, where over 200,000 pregnant women have had a COVID-19 vaccine, has not raised any safety concerns. The large trials which showed that these vaccines are safe and effective did not include pregnant women – as often happens in clinical trials. This means there was limited information about the effects of COVID-19 vaccination in pregnant women at the start of the vaccination programme, but we have a lot more real time data now.

As these are new vaccines, there are no studies yet on the long term effects on babies born to women who had a COVID-19 vaccine. But as COVID-19 vaccines are not 'live' vaccines they cannot cause infection, and other non-live vaccines have been given to women in pregnancy for many years without any safety concerns.

Research from across six studies in four countries, involving more than 40,000 pregnant women, shows having the vaccine does not increase the risk of miscarriage, preterm birth, stillbirth, nor does it increase the risk of a small-for-gestational age baby, or the risk of congenital abnormalities.

COVID-19 vaccines do not contain ingredients that are known to be harmful to pregnant women or to a developing baby. Studies of the vaccines in animals to look at the effects on pregnancy have shown no evidence that the vaccine causes harm to the pregnancy or fertility. The COVID-19 vaccines that we are using in the UK are not 'live' vaccines and so cannot cause COVID-19 infection in you or your baby.

Pregnant women should be offered the Pfizer BioNTech or Moderna vaccines, as all of the safety monitoring data from the United States relates to these two vaccines.

Pregnant women who have had one dose of AstraZeneca (before they became pregnant or earlier on in pregnancy), are advised to complete vaccination with a second dose of AstraZeneca.



## Does it matter what stage of pregnancy I am in?

The vaccine is considered to be safe and effective at any stage of pregnancy. There's no evidence that delaying until after the first 12 weeks is necessary.

One dose of COVID-19 vaccination gives you good protection against infection, but with the most recent (Delta) variant of the virus, two doses are needed to give a good level of immunity. Second doses are given 8 weeks after the first dose and it is recommended you receive two doses before giving birth, or before you enter the third trimester, when the risk of serious illness with COVID-19 is greatest.



## Will having a COVID-19 vaccination affect my work?

No vaccine is 100% effective, but studies suggest that it will help prevent some (but not necessarily all) transmission. So, having a vaccine will not change your occupational risk assessment. This includes advice that you should not work in high-risk areas if you have another serious medical condition, or if you are beyond 28 weeks' gestation. You will still need to follow the advice in your workplace and at home:

- practise social distancing
- wear a face mask as necessary
- wash your hands carefully and frequently

# The information below will help you to think about your decision to have the vaccine if you are pregnant and are eligible for vaccination

## You are at higher risk of catching COVID-19 if:

- you or someone in your household is a health or social care worker or works in a care home
- your community has a high or increasing rate of COVID infections
- you have frequent contact with people outside your home
- you are not able to comply with social distancing for the rest of your pregnancy
- you live in a crowded household
- you are of Black or Asian ethnicity, or from another minority ethnicity background

## You are at higher risk of becoming unwell with COVID-19 if:

- You have underlying medical conditions such as immune problems, diabetes, high blood pressure, heart disease or asthma
- You are overweight (your BMI is 25 or over)
- You are over the age 35
- You are in your third trimester of pregnancy (over 28 weeks)

## What are the recommendations?

- COVID-19 vaccines are recommended in pregnancy. Vaccination is the best way to protect against the known risks of COVID-19 in pregnancy for both women and babies
- Vaccination is recommended to all pregnant women but especially if you are at higher risk of becoming seriously unwell if you do catch COVID-19
- You may wish to discuss the risks and benefits of vaccination, including possible side-effects, with a healthcare professional before making your final decision. If you choose to have a vaccine, then your healthcare professional will help to facilitate this choice. However, as for the non-pregnant population, you can receive a COVID-19 vaccine even if you haven't had a discussion with a healthcare professional.