



Susceptibility to COVID-19 in Pregnant and Breastfeeding Women

Ehsan ALLAH KALTEH¹, Mohammad FARAROOEI², Somaye ALJALILI³, *Mousa GHELICHI-GHOJGH⁴

1. *Infectious Disease Research Center, Golestan University of Medical Sciences, Gorgan, Iran*
2. *HIV/AIDS Research Center, Shiraz University of Medical Sciences, Shiraz, Iran*
3. *Health Center of Kavar, Shiraz University of Medical Sciences, Shiraz, Iran*
4. *Student Research Committee, Shiraz University of Medical Sciences, Shiraz, Iran*

***Corresponding Author:** Email: mghelichi2000@yahoo.com

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Dear Editor-in-Chief

In late 2019, in Wuhan China, a novel coronavirus caused a wide epidemic of acute respiratory illness. The virus was then defined as severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). In Feb 2020, (WHO) named the disease COVID-19 (1). Since the early reports of cases of COVID-19, infection has spread worldwide, prompting the WHO to declare a public health emergency in late Jan and a pandemic in Mar 2020 (2). At the present time, the rate of infection is increasing hourly (3).

Currently, there is a serious lake of reports and data on the susceptibility of pregnant women concerning COVID-19. However, when reviewing publish reports on other types of coronavirus infections, no evidence is found suggesting a higher susceptibility of pregnant women and their fetus to coronavirus infections (4). In two reports, including 18 pregnant women with suspected or confirmed COVID-19 pneumonia, there was no laboratory evidence of vertical transmission of the infection from mother to the embryo or neonate (5, 6).

However, several cases of neonatal infections have been reported so far. In one case, COVID-19 infection was diagnosis at day 17 of age after

close contact with her mother and a maternity matron who were both infected with the virus. The other case was diagnosed 36 h after birth; the source and time of transmission, in that case, is reported unclear (7). As a result, concerning COVID-19 among pregnant women, the approach to prevention, evaluation, diagnosis, and treatment should be similar to that in other individuals (8). In addition, it is unknown whether the virus can be transmitted from either mother to child via breast milk (5) or droplet transmission through close contact during breastfeeding. Thus, until better understanding of the route of transmission and the effect of COVID-19 infection on fetus and newborns mothers should take extra precautions to prevent themselves and their newborns from infection during pregnancy and breastfeeding (9,10).

As surveillance systems for COVID-19 are being established, it is essential to collect and analyze data on pregnant women and their neonate's to make a clear picture of this important issue (9). The COVID-19 epidemic is rapidly expanding in number of cases and deaths worldwide. Many basics, including reproduction number, contributing factors for severity of illness, and case fatal-



ity rate, are unknown about the virus. Although very limited information is available on COVID-19 infection among pregnant women, reports from SARS and MERS suggest that like other individuals, pregnant women could have a severe clinical course. Surveillance systems for cases of COVID-19 need to include information on pregnancy outcomes. Providing precise interventions to prevent and manage severe cases of COVID-19 is essential for pregnancy.

Conflict of interests

The authors declare that there is no conflict of interests.

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