CAB Conference Call May 14, 2020 12:00 EST Meeting Minutes

Participants:

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APPROVAL OF MINUTES

The minutes from the April 23, 2020 call were approved with no changes.

CORONAVIRUS DIESEASE 2019 (COVID-19) TOWN HALL #4 WITH PHACS CLINICIANS

Dr. Lynn Yee talked about COVID-19 and pregnancy. **Lynn** explained that COVID-19 maybe not be as bad as other viruses can be during pregnancy, relatively speaking. **Lynn** reviewed the list of questions from the CAB about pregnancy:

Are there any trends in pregnancy complications for pregnant people living with HIV who had COVID-19?

Lynn explained that the coronavirus is in the same family as SARS and MERS. Pregnant people who had SARS or MERS seemed to get sicker than those with COVID-19. With SARS and MERS there were higher rates of stillbirths, miscarriages, and preterm deliveries. Research is showing that COVID-19 may not affect pregnant people any more than non-pregnant people. Pregnant people who get very sick tend to have underlying health conditions. These conditions may include diabetes, heart disease, or if the pregnant person is older. Pregnant people living with

HIV do not appear to be more at risk than people without HIV. In fact, people living with HIV seem to be at less risk than people without HIV. This could be because there may be a protective effect from HIV medications.

Can pregnant people who have COVID-19 pass the coronavirus to their fetus?

Lynn explained that so far research shows that the virus cannot be passed to the fetus. Researchers have found that it does not look like the virus passes through the blood into the placenta and to the fetus. This is called trans placental transfer. Some newborns have gotten coronavirus. However, researchers think these cases happened after birth. It is likely that the babies got the virus from their mom after birth or from a healthcare worker.

Does the coronavirus increase the risk of delivering early?

Lynn talked about sick pregnant people. When pregnant people get really sick, the body can respond by triggering contractions. This could be the body trying to protect the pregnant person. It may be a result of inflammation. This means that when a pregnant person is really sick, the preterm birth risk is much higher. There have been some reports of the coronavirus causing people to have early deliveries. However, we do not know yet if that is due to the virus itself or due to how sick the person was (such as if they had a high fever or inflammation). There have been many people who had the coronavirus and delivered on time.

What happens if a pregnant person gets COVID-19 right when they conceive or during the first trimester?

Lynn explained that researchers are still studying COVID-19 during the first trimester. We do not yet know if there are concerns.

Should I delay getting pregnant during the pandemic?

Lynn explained that pregnancy is a personal and individualized decision. Researchers do not have a lot of information about COVID-19 and early pregnancy. However, people have to weigh the risks. A person may not be able to delay pregnancy due to their age or health conditions. Talk with your doctor.

Can the coronavirus be transmitted by sperm?

Lynn explained that researchers are still looking into whether the virus can be transmitted sexually. A recent study found that the virus may be found in semen. This does not necessarily mean it can be transmitted to a partner. More research needs to be done.

Is the coronavirus present in breastmilk?

Lynn explained that is does not appear that breastmilk contains the virus particles. More research needs to be done. Doctors are more concerned about the position of a baby during feeding. Coronavirus can be transmitted from particles in the nose and mouth. Someone who has COVID-19 should not feed a baby. If no one else is available to feed the baby, people should wear masks and gloves while feeding.

Should women be considering home births or is it safe to deliver in a hospital?

Lynn explained that hospitals are very safe right now. Hospitals are working hard to keep people who have coronavirus away from others. Staff are wearing protective equipment. There are also additional protective measures in the hospital. Staff have to take their temperature and be screened before going to work each shift. Hospitals may actually be safer than grocery stores. Delivering at home can have uncertainties. There is not much additional concern for women who have been planning home births all along. However, pregnant people should not consider home births last minute without any preparation or back up plans in place.

Are there any specific precautions pregnant people should take in regards to COVID-19?

Lynn talked about precautions. Everyone should be taking precautions. This means washing hands and avoiding unnecessary social contact. Pregnant people are encouraged to use telemedicine when they can. People who are 36+ weeks along should be extra cautious. This is because it is recommended that people who have COVID-19 do not have contact with their newborns. This is very concerning because it may affect bonding. It may also have significant effects on the mother's mental health. Pregnant people close to their due date should try to isolate as much as possible.

What should a pregnant person do if someone in their household gets COVID-19?

Lynn explained that pregnant people should talk to their doctor. Set up a telemedicine visit if possible. Many clinics allow testing for people who live with others who have confirmed cases of COVID-19.

• Is coronavirus the kind of virus that would need to be studied in parents and children over time like HIV in PHACS?

Lynn explained that it depends. It is likely that the coronavirus is not like chronic viruses like HIV or Hepatitis. It is probably not the kind of virus for which someone would need treatment forever. We do not yet know about immunity. It is unclear whether prior exposure immunity protects people from getting the virus again. We do not know if it is like the flu, which people can get every year because the strain changes. It may take years to have all the answers. Researchers are hopeful that the coronavirus will not be the kind of virus that would affect children long-term.

Are any COVID-19 vaccine trials being studied in pregnant people?

Lynn explained that the history of vaccine testing in pregnant people has always been slow. Pregnant people are not usually included in early vaccine trials. This is because researchers want to protect pregnant people and their fetuses from unknowns in these trials. Some researchers feel that pregnant people should make decisions from themselves. It will likely be a long time before vaccines are tested in pregnant people.

• Is PHACS considering any COVID-19 research with placentas?

Lynne explained that PHACS is considering applying for funding for COVID-19 research. This may include collecting cord blood and placentas. It may also include collecting blood from pregnant people.

Can pregnant people get the same treatments as non-pregnant people?

Lynn explained that for the most part pregnant people can get the same treatments as non-pregnant people. There have been some treatments for COVID-19 that are generally considered safe in pregnancy. This includes Plaquenil. However, Plaquenil may not work very well. Researchers are still studying it. Remdesivir is another drug being studied. Some research has shown that Remdesivir may shorten the duration of illness. It may also lower the death rate. Pregnant people are not eligible to participate in the Remdesivir research. However, they can get a compassionate use application that allows them to try a research drug that is not yet proven to work. This is used in cases where there are no other options. Unfortunately, researchers do not yet know how Remdesivir affects fetuses later in life.

Is it safe to use a midwife right now?

Lynn explained that many hospitals will allow a midwife into delivery. This is if the pregnant person does not have the coronavirus.

• Are Doulas allowed in the delivery room right now?

Lynn explained that it depends on the hospital. Yes, if the hospital considers Doulas to be medical personnel. If not, they are just considered support people. Some hospitals may have restrictions on how many support people can be in the delivery room.

NOTE: The next CAB call will be on Thursday, May 28, 2020 at 12:00 pm EST.