CARE OF PREGNANT WOMEN IN COVID-19 PANDEMIC

UNDERSTANDING COVID AND PREGNANCY

- Pregnant women are not at higher risk of contracting COVID 19 than anyone else.
- Most Pregnant women will be asymptomatic or have mild disease, but their health may deteriorate rapidly and that might affect the foetal outcome.
- Over 95% of newborns of severe acute respiratory syndrome coronavirus 2(SARS-CoV-2) positive mothers have been in good condition at birth

As a frontline health functionary:

- Check for signs of COVID 19 (fever, cough, difficulty in breathing etc) and if needed immediately refer for COVID testing.
- Support pregnant women to receive regular 4 antenatal check-ups
- Ensure additional ANC visit in case of any danger signs
- Deliver all essential medicines such as IFA, Calcium, ORS, Zinc, contraceptives at home
- Educate the assigned caregiver/ pregnant woman regarding COVID and pregnancy danger signs/symptoms/complications of pregnancy
- Ask the pregnant women to inform about decreased or no foetal movement
- In case of presence of warning signs, arrange teleconsultation/ phone call with CHO/MO
- Follow up with Pregnant women who missed due date of ANC visit by more than 3 weeks
- For birth planning, prepare a list of healthy birth companions
- Arrange for referral transport with support from VHSNC/MAS/JAS
- Ensure immunization as per schedule

RISK FACTORS
Certain risk factors tend to increase the risk of complications during COVID-19 such as:
- Diabetes
- Hypertension
- Asthma
- HIV

EFFECTS OF COVID ON MENTAL HEALTH
Increase anxiety, psychological distress & sleeplessness due to:
- isolation & lockdown
- contracting infection
- possible effect on the baby
- Stigma due to COVID-19

How to reduce Mental Stress?

1) Continue your accustomed work.
2) Practice yoga, meditation and stay positive.
3) Engage in recreational activities.
4) Share your feelings with others.
5) Take adequate rest.
6) Maintain good work life balance.

Educate pregnant women to practice COVID-19 appropriate behaviour

- Wear face mask. Avoid touching your face, nose, eyes & mouth
- Cover your cough or sneeze with a flexed elbow
- Clean your hands often. Wash with soap and water for 40 sec or use an alcohol-based sanitizer
- Maintain physical distancing. Avoid social gatherings and time spent in crowded places
Care of Pregnant women suspected with COVID

- Delay by 14 days ANC visit of pregnant women staying in a household of COVID positive,
- Isolate the pregnant women and provide necessary care till the test results are received.
- Treat pregnant mothers with symptoms as suspected case of COVID-19 even if the previous test is negative
- Follow up daily through home visit or telephone all suspected pregnant women, for timely identification of warning signs & appropriate referral

Care of Pregnant women infected with COVID

- Maintain a line list of COVID positive pregnant women.
- Follow up daily through home visit or telephone all suspected pregnant mothers for timely identification of warning signs & appropriate referral
- Educate pregnant women to strictly follow home isolation as per guidelines.
- Opt for telephonic consultation & defer the in-person ANC visit for atleast 14 days if COVID positive Pregnant Women having no or mild symptoms.
- For safe institutional delivery, identify the nearest health facility, preferably a tertiary health care facility to manage possible complications.
- Carry Mother and Child Protection card (MCP) to ensure smooth admission and maternity benefits

Remember:

Before, during and after birth, all women and newborns are entitled to high quality care with or without COVID-19

WOMEN WITH COVID-19 CAN BREASTFEED

REMEMBER TO:

1. Wear mask and practice respiratory hygiene and
2. Wash hands with soap and water before and after touching the baby
3. Routinely clean and disinfect surfaces

All women, are entitled to a safe and positive childbirth experience, whether or not they have a confirmed COVID-19 infection

Respect and dignity
Companion of choice
Clear communication by maternity staff
Pain relief strategies
Mobility in labour where possible and birth position of choice