

## Information for PREGNANT WOMEN



Most pregnant women who have had 2009 H1N1 flu have recovered without complications. However, compared with people in general, pregnant women with 2009 H1N1 flu have been more likely to be admitted to hospitals. For this reason, a pregnant woman who thinks she might have the flu should call her doctor right away.

### **I'm pregnant but not sick. Is there anything I should do now?**

Talk to their doctor now about the early symptoms of flu, and discuss a plan to be sure they can get treated quickly if they get sick with the flu.

It's always better to avoid getting the flu in the first place. The best way to prevent the flu is by getting a flu vaccine.

### **What should I do if I think I have the flu?**

Call your doctor right away. If needed, he or she will prescribe an antiviral medicine that treats the flu. The medicine is most helpful if it is started soon, within the first 48 hours after you become sick.

Clinical judgment is needed to decide if a person should be treated with antiviral medicines.

### **What should I do if I have a fever?**

Call your health care provider right away. Any fever should be treated as soon as possible because it can cause problems for the pregnant woman and her unborn child. Acetaminophen (Tylenol®) is best for a pregnant woman to use to lower a fever.

### **Is there a test to know for sure if I have 2009 H1N1 flu?**

Yes, but it is expensive and it could take a few days to get the results. Your health care provider can decide if you have any type of influenza and start you on antiviral medications if necessary.

### **What should I do if I have come in close contact with someone who has the flu?**

Call your health care provider. He or she may suggest an antiviral medicine to decrease the chance that you might get sick, or might suggest that you wait to see if you get symptoms before recommending an antiviral medication.

Follow procedures that will reduce your chances of getting influenza (and many other diseases) by washing your hands frequently, avoiding close contact with sick people, and not touching your face unless you have just washed your hands.

### **Is the 2009 H1N1 influenza vaccine safe for pregnant women?**

Influenza vaccines have not been shown to cause harm to a pregnant woman or her baby. The seasonal flu shot (injection) is proven as safe and already recommended for pregnant women. The 2009 H1N1 influenza vaccine is made using the same processes and facilities that are used to make seasonal influenza vaccines

**Is there a particular kind of flu vaccine that pregnant women should get? Are there flu vaccines that pregnant women should not get?**

There are two type of flu vaccine. Pregnant women should get the "flu shot"— an inactivated vaccine (containing fragments of killed influenza virus) that is given with a needle, usually in the arm. The flu shot is approved for use in pregnant women.

The other type of flu vaccine — nasal-spray flu vaccine (sometimes called LAIV for "live attenuated influenza vaccine)—is not currently approved for use in pregnant women, but is approved for use in healthy people 2-49 years of age.

**Will the seasonal flu vaccine also protect against the 2009 H1N1 flu?**

No. The seasonal flu vaccine is not expected to protect against the 2009 H1N1 flu. Similarly, the 2009 H1N1 influenza vaccine will not protect against seasonal influenza.

**Can the seasonal influenza vaccine and the 2009 H1N1 influenza vaccine be given at the same time?**

Yes. The seasonal flu and 2009 H1N1 vaccines may be administered on the same day but given at different sites (e.g. one shot in the left arm and the other shot in the right arm). Pregnant women and others at increased risk of complications of influenza are encouraged to get their seasonal flu immunization and their 2009 H1N1 immunization as soon as it is available.

**What safety studies have been done on the 2009 H1N1 influenza vaccine and have any been done in pregnant women?**

A number of clinical trials which test 2009 H1N1 influenza vaccine in healthy children, adults and pregnant women are underway. These studies are being conducted by the National Institutes of Allergies and Infectious Diseases (NIAID).

**Does the 2009 H1N1 influenza vaccine have preservative in it?**

Yes, however, because some women are concerned about exposure to preservatives during pregnancy, manufacturers will produce preservative-free seasonal and 2009 H1N1 influenza vaccines. There is no evidence that thimerosal (used as a preservative in vaccine packaged in multi-dose vials) is harmful to a pregnant woman or a fetus.

**How many doses of the 2009 H1N1 flu vaccine will pregnant women need to get?**

One dose for persons 10 years of age and older.

Since infants less than 6 months old will not be able to be vaccinated, it is recommended that everyone who lives with or provides care for infants less than 6 months of age receive both the seasonal influenza vaccine and 2009 H1N1 influenza vaccine to provide protection for the infant. One recent study indicated that the influenza vaccine reduced influenza illnesses by 63% in infants up to 6 months of age. This study confirmed that maternal influenza immunization benefits both mothers and infants.

**Should the 2009 H1N1 influenza vaccine be given to someone who has had an influenza-like illness since between April and now?**

Yes. There is no test that can show whether a person had 2009 H1N1 influenza in the past. Many different infections can cause influenza-like symptoms such as cough, sore throat and fever. In addition, infection with one strain of influenza virus will not provide protection against other strains. People for whom influenza vaccine is recommended should receive the 2009 H1N1 vaccine, even if they had an influenza-like illness previously.

**Do I need a test to know if I need the vaccine or not?**

No. There is no harm in being vaccinated if you had 2009 H1N1 influenza in the past. People for whom the 2009 H1N1 influenza vaccine is recommended should receive it, even if they have had an influenza-like illness previously, unless they can be certain they had 2009 H1N1 influenza based on a laboratory test that can specifically detect 2009 H1N1 viruses.

**What are the possible side effects of the 2009 H1N1 influenza vaccine?**

The side effects from 2009 H1N1 influenza vaccine are expected to be similar to those from seasonal flu vaccines. The most common side effects are expected to be mild, such as soreness, redness, tenderness or swelling where the shot was given. Some people might experience headache, muscle aches, fever, nausea and fainting. If these problems occur, they usually begin soon after the shot and may last as long as 1-2 days. Like any medicines, vaccines can cause allergic reactions. However life-

threatening allergic reactions to vaccines are very rare. Anyone who has a severe (life-threatening) allergy to eggs or to any other substance in the vaccine should not get the vaccine. People should always inform their immunization provider if they have any severe allergies, if they've ever had a severe allergic reaction following flu vaccination, or if they have ever had Guillain-Barre Syndrome (GBS).

**Can the family members of a pregnant woman receive the nasal spray vaccine?**

Yes. But pregnant women should not receive the live nasal spray influenza.

**Can a pregnant healthcare worker administer the live nasal influenza vaccine?**

Yes. No special precautions are (such as gloves) are necessary. Hands should be washed or cleaned with waterless hand sanitizer before and after administering the vaccine or having any direct contact with patients in a health care setting.

**What antiviral medicines are available for pregnant women who have the flu?**

Oseltamivir (Tamiflu®) or zanamivir (Relenza®) can be used to treat 2009 H1N1 flu. To get these medicines, a doctor needs to write a prescription. If you get sick, antiviral drugs can make your illness milder and make you feel better faster. They may also prevent serious health problems that can result from flu illness. At this time, Tamiflu® is the best medicine to treat pregnant women who have 2009 H1N1 flu.

## **Is it safe for me to take an antiviral medicine for flu while I am pregnant?**

The flu can cause severe illness and even death in pregnant women. Taking antiviral medicine can help prevent these severe outcomes. At this time, there are no studies suggesting harm to a pregnant woman or her unborn baby if she takes antiviral medicine. Studies in pregnant animals also have not raised concern for problems from taking these medicines.

Even if there was a very small chance that antiviral medicines might cause harm, having the flu could cause more harm. Being pregnant should not stop women from using antiviral medicines if their doctor prescribes them. Antiviral

medicines can be taken at any stage during pregnancy.

## **What is the difference between antiviral medicines for flu and antibiotics?**

Antiviral medicines are used to treat diseases that are caused by a virus; antibiotics are used to treat diseases that are caused by bacteria. Influenza is caused by a virus.

Most women with the flu will be prescribed an antiviral medicine (Tamiflu® or Relenza®). But, if the doctor is concerned that a woman also has a bacterial infection, in addition to the flu, an antibiotic may also be prescribed.

## **CDC SOURCES:**

Vaccination and Pregnancy - [http://www.cdc.gov/H1N1flu/vaccination/pregnant\\_qa.htm](http://www.cdc.gov/H1N1flu/vaccination/pregnant_qa.htm)

Antiviral medications and pregnancy - [http://www.cdc.gov/H1N1flu/pregnancy/antiviral\\_pregnant\\_qa.htm](http://www.cdc.gov/H1N1flu/pregnancy/antiviral_pregnant_qa.htm)

General Pregnancy - <http://www.cdc.gov/h1n1flu/guidance/pregnant.htm>

General influenza information - <http://www.cdc.gov/h1n1flu/qa.htm>

