



The Food and Drug Administration (FDA) issued an Emergency Use Authorization (EUA) for the Pfizer-BioNtech mRNA vaccine (BNT162b2). The vaccine is for people 16 years and older as a 2 dose vaccine given 3 weeks apart. The vaccine is believed to be 95% effective against Covid-19 illness after the second dose of vaccine.

We can discuss with you at your next appointment the use of vaccines in pregnancy and lactation, your level of risk of infection and your access to the vaccine from local agencies. If you do not have access to the vaccine or if you decide to not receive the vaccine, we recommend continuing to be diligent with handwashing, physical distancing and wearing a mask.

Important information from American College of Obstetrician and Gynecologist (ACOG):

<https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2020/12/vaccinating-pregnant-and-lactating-patients-against-covid-19>

- ACOG recommends that COVID-19 vaccines should not be withheld from pregnant individuals who meet criteria for vaccination based on ACIP-recommended priority groups.
- COVID-19 vaccines should be offered to lactating individuals similar to non-lactating individuals when they meet criteria for receipt of the vaccine based on prioritization groups outlined by the ACIP.
- Vaccines currently available under EUA have not been tested in pregnant women. Therefore, there are no safety data specific to use in pregnancy.
- The mRNA vaccines are not live-virus vaccines, nor do they use an adjuvant to enhance vaccine efficacy. These vaccines do not enter the nucleus and do not alter human DNA in vaccine recipients. As a result, mRNA vaccines cannot cause any genetic changes.

Important information from Society of Maternal and Fetal Medicine (SMFM):

https://s3.amazonaws.com/cdn.smfm.org/media/2632/FDA_final.pdf

[https://s3.amazonaws.com/cdn.smfm.org/media/2591/SMFM_Vaccine_Statement_12-1-20_\(final\).pdf](https://s3.amazonaws.com/cdn.smfm.org/media/2591/SMFM_Vaccine_Statement_12-1-20_(final).pdf)

- SMFM strongly recommends that pregnant and lactating people have access to COVID-19 vaccines and that they engage in a discussion about potential benefits and unknown risks together with their healthcare providers regarding receipt of the vaccine.
- Counseling should balance the lack of data on vaccine safety for the fetus, risks to pregnant people from COVID-19 infection, and a person's individual risk for infection and severe disease.
- SMFM acknowledges that data do not exist regarding COVID-19 vaccine safety in pregnant and lactating people, and has long advocated that pre-clinical studies be conducted and that these populations be included in clinical trials. As data emerge, counseling and clinical recommendations will likely shift, as some vaccines may be more suitable for pregnant women.