

## Risk for severe disease up for pregnant women with SARS-CoV-2

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be admitted to an intensive care unit, receive invasive ventilation, receive extracorporeal membrane oxygenation, and die compared with nonpregnant women after adjustment for age, race, and underlying medical conditions (adjusted risk ratios, 3.0, 2.9, 2.4, and 1.7, respectively). Disparities in risk by subgroup were highlighted on stratification by age and race/ethnicity.

"Understanding the risk posed by SARS-CoV-2 infection in <u>pregnant women</u> can inform clinical practice, risk communication, and medical countermeasure allocation," the authors write.

"Pregnant women should be informed of their risk for severe COVID-19-associated illness and the warning signs of severe COVID-19."

More information: Abstract/Full Text

(HealthDay)—Pregnant women with severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) have increased risks for severe COVID-19-associated illness, according to research published in the Nov. 2 early-release issue of the U.S. Centers for Disease Control and

Prevention Morbidity and Mortality Weekly Report.

Laura D. Zambrano, Ph.D., from the CDC COVID-19 Response Team, and colleagues provide updated information about symptomatic women of reproductive age with laboratory-confirmed SARS-CoV-2.

The CDC received reports for 1,300,938 women aged 15 to 44 years with laboratory results indicative of acute infection with SARS-CoV-2. The researchers found that for 35.5 percent of women with laboratory-confirmed infection, data on pregnancy status were available, and 88.7 percent were symptomatic. Among symptomatic women, 5.7 percent were reported to be pregnant. Pregnant women were significantly more likely to

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