



Flu and Pregnancy

Some Things You Need To Know

If you are pregnant, or planning to get pregnant, you need to make special plans to protect yourself and your baby from the flu.

Flu (influenza) is a contagious viral illness that spreads through droplets released when an infected person coughs, sneezes or talks. Flu activity generally starts to increase in October and most commonly peaks during the winter months. Changes in the immune system during pregnancy can make women more vulnerable to the flu and put them at greater risk for severe illness and complications—including hospitalization during pregnancy or postpartum. This can lead to serious problems for you and your baby, including premature labor and birth. If you have asthma, diabetes or are very overweight, your risk of severe flu illness during pregnancy is even higher.

Yearly flu vaccination is one of the best ways to help protect mom and baby against the flu. Vaccines trigger the body's natural process of building immunity. Studies show that getting a flu shot during pregnancy not only protects the mom but also provides protection to your baby after the baby is born. This is very important since your baby can't receive the flu shot until six months old. Flu shots have been given to millions of pregnant women over many years and have not been shown to harm pregnant women or their babies. It's also important to encourage people around you and your baby to get vaccinated. Flu vaccine can be given any time during pregnancy. You can't get flu from the flu shot. Flu vaccine is an inactivated vaccine (killed virus) and therefore cannot give you the flu.

If you're pregnant and think you're sick with the flu, call your health care provider right away. Antiviral medication can treat flu infection and works best if started early. You may be reluctant to take flu medicine because of concern for your baby. If you have the flu, medical experts agree that the benefits of receiving antiviral drugs are much greater than the risks. All available evidence suggests that vaccination and flu treatment are far safer for the baby than untreated flu.

Breastfeeding protects babies because breast milk passes your antibodies to your baby—although breastfeeding is not a replacement for flu vaccination.

The antibodies (immune proteins) in breast milk help fight off infection.

If you get the flu, do not stop breastfeeding. Continue to nurse your baby while being treated for the flu unless your health care provider tells you to stop.

For more information about protecting infants against the flu, go to: www.cdc.gov/flu/parents/

For more information about the flu and how to protect yourself, go to:

- www.cdc.gov/flu/protect/vaccine/pregnant.htm
- www.flu.gov/at-risk/pregnant/index.html#
- www.doh.wa.gov/flunews





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What To Do If You Are Pregnant

Protect yourself from the flu

- Get flu shots for you and your family members. You can get a flu shot at any time during pregnancy. Pregnant women should **NOT** get the nasal spray vaccine.
For more information, go to:
www.cdc.gov/flu/protect/vaccine/pregnant.htm
To find out where to get a flu shot, go to:
www.doh.wa.gov/flunews
- Wash your hands frequently. Carry alcohol-based hand sanitizer for when there is no soap and water.
- Cover your cough to prevent the spread of flu germs.
- Avoid touching your eyes, nose and mouth.
- Stay away from sick family members and friends as much as possible.
- Know the symptoms of flu. Contact your health care provider right away if you get sick. Pregnant women who get a fever should treat their fever with Tylenol® (or store brand equivalent). Some patients may also need medication that specifically fights the flu. Flu symptoms include: fever, cough and/or sore throat, runny or stuffy nose, headaches and/or body aches, chills, fatigue, nausea and occasionally vomiting and/or diarrhea.
- If you have the flu, take antiviral medicine and the fever medicine (Tylenol® or store brand equivalent) your provider recommends for flu symptoms.
- Unless your health care provider tells you to come in for an exam, stay at home until your fever has been gone for 24 hours without taking fever medicine.

Planning for your special needs

- Know who can help you and your family if you get sick. Keep a list of phone numbers, including your prenatal care provider.
- Keep breastfeeding, even if you get sick, unless your health care provider tells you to stop. Take special care not to cough or sneeze in your baby's face. You might consider wearing a face mask. Wash your hands often.

Get emergency care if you have any of the following:

- Difficulty breathing or shortness of breath.
- Pain or pressure in the chest or abdomen.
- Sudden dizziness.
- Confusion.
- Severe or persistent vomiting.
- A high fever that is not responding to Tylenol® (or store brand equivalent).
- Decreased or no movement of your baby.

More information

General flu information

www.doh.wa.gov/flunews

More information on pregnancy and influenza

www.flu.gov/at-risk/pregnant/index.html#

The Flu: A Guide for Parents

www.cdc.gov/flu/pdf/freeresources/updated/a_flu_guide_for_parents.pdf



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