Immunizations

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Immunizations offer protection against certain diseases and are usually given during our childhood. Some immunizations can be given during pregnancy while others cannot. You will be screened for several of the diseases that you (and your unborn baby) might be at risk for having or getting. This screening is through blood tests (Rubella, Hepatitis B) or through your childhood disease history (measles, mumps, chickenpox) or immunization history (tetanus). It is important to know if you are protected against these diseases, and, if not, what can be done to decrease your risk of getting a disease. If you are at risk for any of the diseases screened for, immunization will be offered during your pregnancy (if safe) or immediately after the baby is born. If you cannot avoid travel to foreign countries during your pregnancy, talk to your health care provider to see what can be done to lessen your risk from other diseases such as yellow fever and malaria.

Vaccine/ Disease	Screening for Immunity	Disease Affect on Pregnancy/Baby	Use in Pregnancy
MMR: Measles, Mumps and Rubella- (German Measles)	Childhood disease history obtained at first visit. Rubella screened through a blood test at initial visit.	Measles: increased risk of miscarriage, birth defects, and low birth weight Mumps: possible increased risk of first trimester miscarriage Rubella: Severe congenital defects especially when disease occurs early in pregnancy	Immunization is not safe during pregnancy. Avoid gatherings of young children and people with disease while pregnant. Receive immunization after delivery and use birth control for three months after delivery.
Influenza: Seasonal Flu & H1N1 Flu	None	Possible increase in miscarriages Increased risk of serious illness and/or death	Single dose injection safe to use in pregnancy. Mist not safe in pregnancy.
Hepatitis B	Screened with a blood test at first visit	Possible increase in miscarriage, pre-term, birth, and neonatal hepatitis	Safe to use in pregnancy for women at high risk of exposure such as laboratory personnel, etc.
Tetanus- diphtheria (Td)	Tetanus shot/booster required every 10 years.	Increased risk of fetal death	Safe in pregnancy. If more than 2 years since last Td, Tdap should be received after delivery, ideally prior to hospital discharge.

Vaccine/ Disease	Screening for Immunity	Disease Affect on Pregnancy/Baby	Use in Pregnancy
Tetanus- Diptheria- Pertussis (Tdap)	None	If given during pregnancy, may interfere with baby's immune responses to vaccines	Given after delivery, prior to hospital discharge, if greater than 2 years from Td immunization and never received
Varicella (chicken pox)	Childhood disease history obtained at first visit.	Severe infection in adults Risk for congenital varicella syndrome (limb deformaties, skin scarring, eye defects) and death	Safe for women exposed to varicella during pregnancy For non-immune women given after delivery, prior to discharge with recommendation to use birth control for at least three months
Smallpox	None	See www.vaccines.army.mil	Immunization is not considered safe for pregnant women and pregnancy should be avoided 4 weeks after getting the smallpox vaccine
Anthrax	None	See www.vaccines.army.mil	As a precaution, pregnant women should not be routinely vaccinated with anthrax vaccine
HPV	None	Low risk for warts in the larynx of the baby.	Not considered safe in pregnancy. Vaccine series can be started immediately postpartum in women up to age 26