

CANADIAN SURVEILLANCE OF COVID-19 IN PREGNANCY: EPIDEMIOLOGY, MATERNAL AND INFANT OUTCOMES

Report #1

Early Release: Maternal and Infant Outcomes (March 1 to September 30, 2020) from Three Canadian Provinces: Summary

This report provides preliminary findings from CANCOVID-Preg in 3 provinces: BC, Alberta, and Ontario. CANCOVID-Preg is a national surveillance project that was initiated to monitor pregnancy outcomes during the pandemic and assess both maternal and infant outcomes related to COVID-19.

As of November 25th, 2020:



Globally: >50 000 000 cases
>1 000 000 deaths



Canada: >300 000 cases
>11 000 deaths



Pregnant women:
1584 cases

430
positive pregnant cases
occurring Mar-Sep 2020
were included

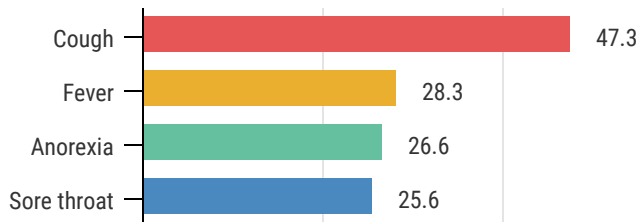


41.4% aged 30-35

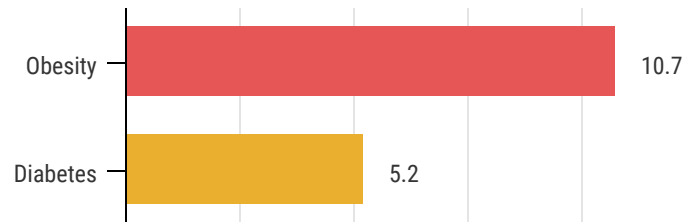
34.9% diagnosed at 28-37 weeks gestation

69.7% infected via community transmission

Most common symptoms



Most common underlying conditions



Absolute rates of serious complications in pregnant women were 11% hospitalized, 2.3% admitted to ICU.

Compared to non-pregnant reproductive aged women, pregnant women were:

at greater risk of being hospitalized

RR: 6.57

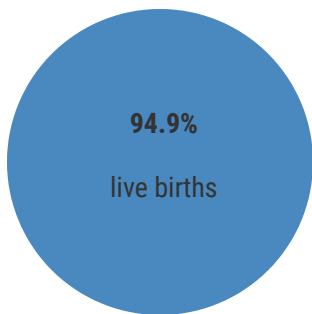
(95% CI: 4.82-8.95)

at greater risk of being admitted to ICU

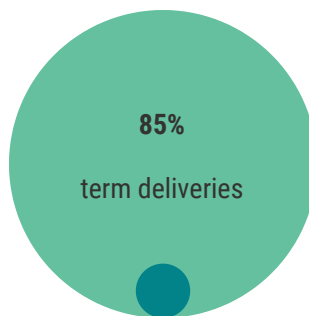
RR: 8.49

(95% CI: 4.13-17.46)

Among 311 pregnancy outcomes:



<6 stillbirths



15% preterm



<6 positive infant NP swabs

Early data on SARS-CoV-2 infection during pregnancy was reassuring, however, more recent data emerging globally and nationally suggests an increased risk of hospitalization and ICU admission among pregnant women, compared to their non-pregnant counterparts. Preterm birth rates are 2 fold higher than background rates in the population. Perinatal infection remains an uncommon outcome.

This data, though still from a limited number of pregnancies, suggests the need for enhanced monitoring of pregnant women should they contract COVID-19 and close monitoring of pregnancy outcomes. Further data will be reported on cumulative cases over the next 2 months and regularly thereafter, to better inform Canadian clinical and public health recommendations.