

# Safer Baby Bundle

WORKING TOGETHER TO REDUCE STILLBIRTH



## A message for pregnant women and their families from the Safer Baby Bundle team in light of the COVID-19 pandemic

Currently, the evidence about the new Coronavirus (COVID-19) suggests pregnant women are not at a greater risk of being infected with COVID-19 compared to the general population. At this time, it seems that the risk of COVID-19 infection to women and their babies during pregnancy is very small. But as we're still learning about COVID-19, pregnant women should be considered a vulnerable group until there's more evidence about how it affects them and their babies.

We appreciate that social distancing has meant that there have been changes to the way pregnancy care is provided to women. We also understand that pregnant women are anxious about COVID-19 and this concern may lead them to avoid seeking care to reduce their risk of contracting the infection.

The Safer Baby Bundle team along with the Australian College of Midwives (ACM) and the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) are monitoring the evolving COVID-19 situation very closely. We continue to access expertise, in Australia, including from the Australian Government and internationally, to provide ongoing guidance during this time.

**The following fact sheet is designed to ensure women are still receiving important messages about stillbirth prevention from their healthcare providers during the COVID-19 pandemic. The fact sheet complements the information and advice contained in the Safer Baby Bundle (SBB) eLearning module ([learning.stillbirthcre.org.au](http://learning.stillbirthcre.org.au)) and highlights where recommendations in the SBB eLearning module have been changed in light of the COVID-19 outbreak.**

### Additional Information

Information and advice for the non-pregnant population applies equally to pregnant women. The Safer Baby Bundle team recommends the following websites as reliable sources of information for pregnant women and their families in Australia:

- [health.gov.au](http://health.gov.au)
- [learn.stillbirthcre.org.au](http://learn.stillbirthcre.org.au)
- [midwives.org.au](http://midwives.org.au)
- [ranzcog.edu.au](http://ranzcog.edu.au)

### Disclaimer

The Stillbirth CRE, ACM and RANZCOG commentary on COVID-19 should be considered advisory and not prescriptive, and all healthcare workers and the general public should heed the advice of government and health authorities.



The Royal Australian  
and New Zealand  
College of Obstetricians  
and Gynaecologists  
*Excellence in Women's Health*

For more information about the Safer Baby Bundle program and to access the elearning resources for health care professionals go to [learn.stillbirthcre.org.au](http://learn.stillbirthcre.org.au)

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## Decreased Fetal Movements

### Effect on recommendations during COVID-19:

No change.

### Message for women:

- Even during the COVID-19 pandemic, monitoring your baby's movements is important.
- Please call your healthcare provider immediately if concerned and come in to be assessed.
- The use of at-home Doppler ultrasound to listen to your baby's heart rate as a way of checking your baby's health is not based on good research and is not recommended. Your baby's movements are the most reliable way to know your baby is well.

## Sleep on Side

### Effect on recommendations during COVID-19:

No change.

### Message for women:

- Going to sleep on your side from 28 weeks' gestation is safest, do not worry if you wake up on your back, settle to sleep on your side again. During the COVID-19 pandemic, this is an important step that women can take to reduce the risk of stillbirth.

## Fetal Growth Restriction

### Effect on recommendations during COVID-19:

Symphysis fundal height (SFH) will not be measured if your appointment is via telehealth instead of face-to-face.

### Message for women:

- While face-to-face appointments are kept to a minimum through telehealth, assessment of your baby's growth by SFH measurement or ultrasound scan will continue to be part of routine antenatal care.
- Monitoring baby's movements is an important indicator of fetal wellbeing.
- If something doesn't feel right, or if you feel like your baby is not growing appropriately, please contact your healthcare provider.

## Smoking

### Effect on recommendations during COVID-19:

Smokerlyzers are not recommended. To limit transfer of the COVID-19 infection, use of smokerlyzers (CO monitors) is not recommended. However, the 'Ask, Advise, Help' model can still be used to support women to stop smoking in pregnancy.

### Message for women:

- Smoking may increase the severity of COVID-19 infection. Stopping smoking in pregnancy is important for both you and your baby, particularly during the COVID-19 pandemic because COVID-19 affects the respiratory system and smoking increases the risk of respiratory illness.
- Help is available to help you and your partner to stop smoking in pregnancy. Talk to your midwife or doctor and seek additional help from Quitline.

## Timing of Birth

### Effect on recommendations during COVID-19:

No change.

### Message for women:

- The risk of having a stillborn baby is small for most women and there are ways to reduce the risk even further.
- Your healthcare provider will talk with you about your own risk for having a stillborn baby and discuss with you steps you can take to reduce the risks such as being aware of your baby's movements and sleeping on your side.
- For some women, particularly those with risk factors for stillbirth or other obstetric indications, having the baby earlier than the due date might be best.
- Currently, maternal COVID-19 infection is not considered a risk factor for stillbirth or a reason for early planned birth unless there are immediate risks to the woman's health.
- Avoiding early planned birth unless clearly clinically indicated will minimise risk of neonatal complications.