

# International Journal of Clinical Obstetrics and Gynaecology

ISSN (P): 2522-6614  
ISSN (E): 2522-6622  
© Gynaecology Journal  
www.gynaecologyjournal.com  
2021; 5(2): 209-210  
Received: 12-01-2021  
Accepted: 14-02-2021

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## Successful pregnancy outcome in a COVID-19 positive mother contacted during the first trimester: Case report

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DOI: <https://doi.org/10.33545/gynae.2021.v5.i2d.888>

### Abstract

The COVID-19 pandemic started in China at the end of the year 2019 and spread across all continents. Little is known about the effect of the COVID19 infection on pregnancy and its effect on the fetal outcome. In this case report A Multigravida was diagnosed As COVID-19 positive in the first trimester, was followed through her pregnancy and delivered a full-term normal baby without any complications. This case report encourages us to continue the pregnancy of COVID 19 positive woman who come in contact during their first trimester by assessing risk versus benefits. At present sparse data is available on the effect of virus on pregnant women and its effect. There was no teratogenic effect of the virus on the fetus though the infection was contracted in the first trimester, showing promising outcome for COVID 19 pregnancy women who contract the virus during the early stages of pregnancy.

**Keywords:** COVID 19, pregnancy, RT-PCR, corona virus, teratogenicity

### 1. Introduction

Novel corona virus was declared as a pandemic on 11<sup>th</sup> March 2020 by the World Health Organization (WHO). <sup>(1)</sup> In India, the first case of COVID19 was confirmed on January 30<sup>th</sup> 2020. <sup>(2)</sup> Very little was known about the corona virus disease, and lesser was known about its treatment. To prevent exponential spread, the Government of India announced lock down throughout the country. Non-emergency medical services were discouraged. <sup>(1,2)</sup> Pregnant woman were asked to consult their doctors on telephone. During this period of lock down, pregnant women were unable to attend their regular ANC visits due to unavailability of transport and the fear of acquiring Novel corona virus infection. The pregnant women also feared the effect of the virus on the fetus, hence avoided antenatal checkups.

### 2. Case Report

A 31-year-old G2P1L1 with 10 weeks 5 days period of gestation was diagnosed COVID 19 positive in July 2020. She was resident of Vijayapura, Karnataka, India. Her relative was suffering from fever, cough, myalgia, throat pain and was diagnosed to have COVID 19 infection. As a part of contact tracing, six members of the family effected with COVID-19 and RTPCR showed positive report of which three were adults and three were children. Among the three adults, one was the pregnant woman. The pregnant woman was asymptomatic. The other adults are asymptomatic too however the children developed mild symptoms. The children responded to treatment. The pregnant women did not visit hospital prior to COVID19 testing due to fear of contacting the viral infection. After testing positive for COVID-19, she was put into home isolation. She was advised to take Tab. Azithromycin 500mg OD for 5days, Vitamin C supplements and paracetamol tablets if she developed fever. However, during the period of isolation, she remained asymptomatic. She visited hospital for Antenatal care (ANC) after the period of isolation. Her COVID- 19 RTPCR test was repeated and it was negative. She was around 12 weeks 5 days at the time. The patient was counselled since there was not much information regarding vertical transmission of COVID- 19 and its effect on the embryo, the patient outweighed the benefit to risk and decided to continue the pregnancy. She underwent regular ANC visits at 12weeks 5 days, 14 weeks, 29 weeks and 38weeks of gestation. There were no abnormalities detected in fetus in ultrasonography done at 12 weeks or 20 weeks of gestation.

There was no evidence of fetal growth restriction, oligohydramnios or any other abnormality in the further obstetric scans the patient. The pregnant woman had a full term normal delivery, delivering a healthy male baby of 2.7kgs. Clinical examination did not reveal any abnormalities. COVID-19 test by RT-PCR test and IgG and IgM Covid 19 antibodies was done and were negative. Abdominal ultrasonography of the abdomen and neonatal echocardiography were done and they were normal. The baby and mother were discharged in good health.

### 3. Discussion

COVID-19 is a capsulated single-stranded RNA virus, it is a variety of SARS-CoV-2. It affects the respiratory system. <sup>(3)</sup> In a critically ill pregnant woman with COVID-19, there may be an indication for termination of pregnancy, to help the mother to recover from the covid pneumonia. This may in turn lead to delivery of a premature baby with its complications of prematurity. Recent research shows that the route of delivery either vaginal or cesarean did not affect the outcome of the neonate, most of the babies studied did not contract the COVID-19 infection from the mother <sup>(4)</sup> In this case as the pregnant woman was asymptomatic and little evidence was there to counsel the women on the effects of the virus on the fetus.

### 4. Conclusion

This case report encourages us to continue the pregnancy of COVID-19 positive woman who come in contact during their first trimester by assessing risk versus benefits. However, there is currently limited research available on the effect of COVID-19 on pregnant women and their effect on neonatal outcome. There was no teratogenic effect of the virus on the fetus though the infection was contracted in the first trimester thereby showing promising outcome for COVID-19 pregnancy women who contract the virus during the early stages of pregnancy. As there are not many studies available regarding the effect of COVID-19 on pregnancy outcome who contacted during first trimester of pregnancy, we may continue the pregnancy by assessing risk versus benefits. Still more research to be done to know the effect of COVID-19 on pregnancy.

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