

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

Report #3

Early Release: Maternal and Infant Outcomes (March 1 to December 31, 2020) from Five Canadian Provinces: Summary

This report provides preliminary findings from CANCOVID-Preg in 5 provinces: British Columbia, Alberta, Ontario, Quebec, and Manitoba. 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 December 31, 2020:



Globally: >79 000 000 cases
>1 500 000 deaths



Canada: >500 000 cases
>15 000 deaths



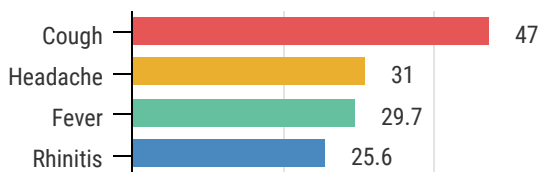
Pregnant women:
2824 cases

1880
positive pregnant cases
occurring Mar-Dec 31
2020 were included



44.6% aged 30-35
38.7% diagnosed at 14-27 weeks
gestation
50.6% infected via community
transmission

Most common symptoms



Most common underlying conditions

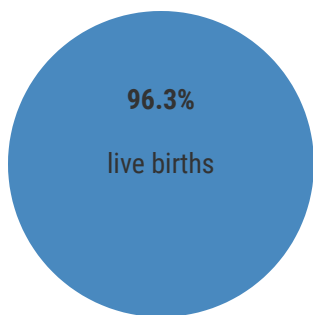


Hospital and ICU admission

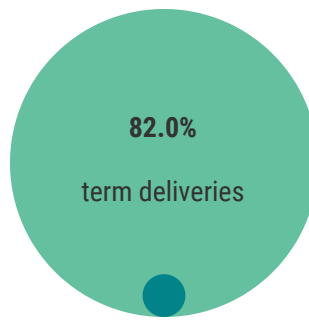
COVID-19-related hospitalizations and ICU admissions among pregnant COVID-19 positive females (18-45 years) in BC (333), AB (626), ON (764), and QC (116) compared to non-pregnant COVID-19 positive females (18-45 years) in BC, AB, ON and QC

	Pregnant positive cases (n=1839) in BC, AB, QC, and ON			Non-pregnant positive cases in BC, AB, QC, and ON (n=136,062)			RR	95%CI
	Number total	Per 1000	Percent	Number total	Per 1000	Percent		
Number and percent hospitalized	148	80.49	8.05%	2056	15.11	1.51%	5.33	4.51 to 6.20
Number and percent admitted to ICU	29	15.77	1.58%	365	2.68	0.27%	5.88	3.80 to 8.22

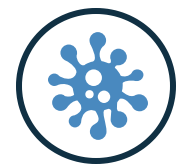
Among 757 pregnancy outcomes:



1.2% stillbirths



12.3% 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 counterpart, although the absolute risk is low. Preterm birth rates also appear higher than background rates in the population. Stillbirth rates were not statistically higher in our sample (1.2%) compared to the national estimate (0.8%) ($\chi^2 = 0.99$, $p = 0.31$, 95% CI = 0.01-0.02). Perinatal infection remains uncommon.

This data, though still from a subset of the country, 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.



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