

# Risk for severe disease up for pregnant women with SARS-CoV-2

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be admitted to an [intensive care unit](#), receive invasive ventilation, receive extracorporeal membrane oxygenation, and die compared with nonpregnant women after adjustment for age, race, and underlying [medical conditions](#) (adjusted risk ratios, 3.0, 2.9, 2.4, and 1.7, respectively). Disparities in risk by subgroup were highlighted on stratification by age and race/ethnicity.

"Understanding the risk posed by SARS-CoV-2 infection in [pregnant women](#) can inform clinical practice, risk communication, and medical countermeasure allocation," the authors write. "Pregnant women should be informed of their risk for severe COVID-19-associated illness and the warning signs of severe COVID-19."

**More information:** [Abstract/Full Text](#)

(HealthDay)—Pregnant women with severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) have increased risks for severe COVID-19-associated illness, according to research published in the Nov. 2 early-release issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Laura D. Zambrano, Ph.D., from the CDC COVID-19 Response Team, and colleagues provide updated information about symptomatic women of reproductive age with laboratory-confirmed SARS-CoV-2.

The CDC received reports for 1,300,938 women aged 15 to 44 years with laboratory results indicative of acute infection with SARS-CoV-2. The researchers found that for 35.5 percent of women with laboratory-confirmed infection, data on pregnancy status were available, and 88.7 percent were symptomatic. Among symptomatic women, 5.7 percent were reported to be pregnant. Pregnant women were significantly more likely to

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