# "Vacunas en el embarazo: Protegiendo a la Madre y al Niño por nacer"

Conferencia Anual de Influenza y Vacunación de Adultos

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### **GAME CHANGER**

(Not all superheroes wear capes)

### Southampton General Hospital, 2020

The artwork appeared in the foyer near the emergency department of Southampton General Hospital in May 2020, during the first wave of the COVID pandemic in the UK.

It was accompanied by a note that read: "Thanks for all you're doing. I hope this brightens the place up a bit, even if it's only black and white."

The work depicts a child who passes over the stereotypical superhero dolls to play with a nurse in a cape who appears to fly like Superman. Banksy donated it to the hospital.

"Game Changer" was sold for \$23 million at Christie's in London on March 23, 2021, becoming one of the most expensive Banksy artworks ever sold at auction. It sold one year to the day after the first UK COVID lockdown.

### August 25, 2025

## RFK Jr. says Covid-19 shot will no longer be recommended for healthy children and pregnant women

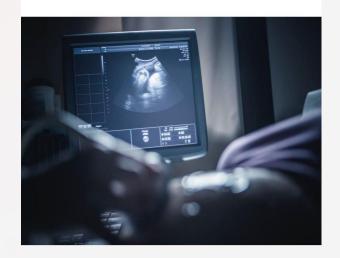
By Brenda Goodman, CNN Updated 4:38 PM EDT, Tue May 27, 2025



NIH Director Dr. Jay Bhattacharya, from left, HHS Secretary Robert F. Kennedy Jr. and FDA Commissioner Dr. Marty Makary announced Tuesday that Covid-19 vaccines would no longer be recommended for healthy children and pregnant women.

# Another major medical association breaks from CDC as ob/gyn group recommends Covid-19 vaccines during pregnancy

By Deidre McPhillips, CNN Updated 5:36 PM EDT, Fri Aug 22, 2025









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**ACOG Releases Updated Maternal Immunization** Guidance for COVID-19, Influenza, and RSV August 25, 2025

Washington, D.C.—Today, the American College of Obstetricians and Gynecologists (ACOG) released updated clinical guidance regarding vaccination during pregnancy against COVID-19, influenza, and RSV. The three guidance documents, all of which recommend maternal immunization, lay out the full body of current scientific evidence that underscores the safety and benefits of choosing to be vaccinated against these respiratory conditions during pregnancy.





### **Comments to CDC Advisory Committee on Immunization Practices**

### Importance of Maternal Immunization

Submitted on June 20, 2025, by the American Academy of Family Physicians; American College of Nurse-Midwives; American College of Obstetricians and Gynecologists; Association of Women's Health, Obstetric and Neonatal Nurses; The National Association of Nurse Practitioners in Women's Health; and the Society for Maternal-Fetal Medicine

Maternal immunization continues to be the most effective way to reduce maternal, fetal, and infant complications from vaccine-preventable diseases, including COVID-19, flu, RSV, Tdap. Protecting and preserving evidence-based vaccine recommendations during pregnancy and the postpartum period can help protect pregnant patients, their infants, and their families. The Advisory Committee on Immunization Practices (ACIP) has been instrumental in providing evidence-based recommendations and guidance on vaccination during pregnancy, which the Maternal Immunization Task Force and other health care organizations use to inform clinical guidance for their members and patients.

As a body of professional organizations representing clinicians who care for pregnant people, the Maternal Immunization Task Force reaffirms the importance of recommending and advocating for COVID-19 vaccination during pregnancy. Infection with COVID-19 during pregnancy is associated with an increased risk of maternal and infant hospitalization.1,2,3 It also increases the risk of several pregnancy-related complications, including preeclampsia, eclampsia, blood clots, and premature delivery.3,4 Neonatal outcomes linked to COVID-19 infection during pregnancy include low birthweight; stillbirth; respiratory distress; and, in rare cases, vertical transmission.4,5,6 COVID-19-related complications tend to be more severe in pregnant patients with particular comorbidities, such as hypertension, obesity, and certain socioeconomic risk factors.7,8 These pregnant patients may face considerable barriers to achieving optimal health due to social, economic, or environmental inequities.

Now more than ever, it's critical to continue to recommend the routine administration of COVID-19 vaccines during pregnancy. Vaccine uptake data since the onset of the COVID-19 pandemic have consistently demonstrated that mRNA vaccines are safe and effective when given during pregnancy. Substantial scientific evidence continues to favor vaccination during pregnancy as the best way to











prevent severe illness; extend protection to the pregnant patient, the fetus, the growing family, and the community; and strengthen immunization as a critical component of maternal care.

The public health and safety of our patients rely on our ability to provide the most up-to-date and clinically accurate information on disease prevention options. The Maternal Immunization Task Force strongly urges the ACIP to continue to review clinical data and disseminate information supported by medical evidence regarding maternal immunization to inform shared decision making with patients and their families.

It is important to note that routine recommendation does not negate the need for shared decision making. This process is critical for pregnant patients considering health decisions that may affect them and their fetuses. Shared decision making in maternal immunization can improve vaccine confidence, address perceived benefits and risks of vaccines, and build trust in evidence-based medicine. With the support of their physician, the pregnant patient should be empowered to make informed decisions for their health, including immunization.

Vaccines are the most efficacious public health tool available in preventing infectious diseases and their related adverse maternal, fetal, and infant health outcomes. Maternal Immunization Task Force members ACOG; the American Academy of Family Physicians; the American College of Nurse-Midwives; the Association of Women's Health, Obstetric and Neonatal Nurses; the National Association of Nurse Practitioners in Women's Health, and the Society for Maternal-Fetal Medicine, along with other partner medical societies, will continue to protect and uphold our recommendations for routine maternal immunization.

American Academy of Family Physicians

American College of Nurse-Midwives

American College of Obstetricians and Gynecologists Association of Women's Health, Obstetric and Neonatal Nurses

The National Association of Nurse Practitioners in Women's Health

The Society for Maternal-Fetal Medicine

### Maternal Immunization Resources

- ACNM Immunization Resources for Providers
- AAFP Immunizations & Vaccines
- AWHONN Vaccinations Save Lives
- ACOG Physician Tools & Patient Resources
- NPWH Maternal Immunization Toolkit
- SMFM Vaccination Guide for Pregnancy

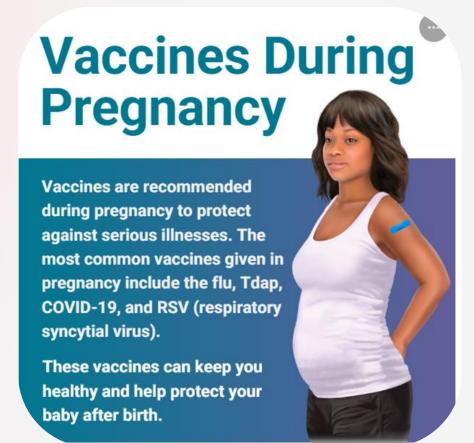
MATERNAL IMMUNIZATION TASK FORCE JUNE 2025 | 2

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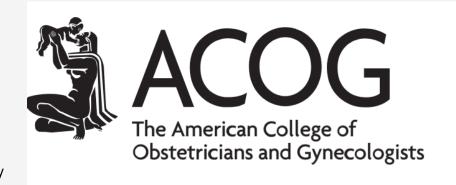
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# Why does it matter?



# Recommended Vaccines During Pregnancy

- Influenza, Tdap, COVID-19, RSV vaccines recommended
  - Routine prenatal care recommendations.
- Additional vaccines as indicated: Hepatitis B, Pneumococcal
  - Certain patients may also benefit from hepatitis B or pneumococcal vaccination during pregnancy.
- Emphasis on vaccine safety and effectiveness
  - Evidence shows no increased risk of adverse pregnancy outcomes.
- Co-administration of vaccines is safe
  - These vaccines can be given at the same time if clinically appropriate, such as flu and Tdap during the same visit.



Dr. Nabal Bracero

Table 1. Summary of Maternal Immunization Recommendations

| Vaccine*   | Indicated<br>During Every<br>Pregnancy | May Be Given During<br>Pregnancy in<br>Certain Populations | Contraindicated<br>During<br>Pregnancy | Can Be Initiated<br>Postpartum<br>or When<br>Breastfeeding<br>or Both |
|--|--|--|--|---|
| COVID-19 <sup>†,1</sup> (see footnote for recommendations)                         |  |  |  |   |
| Inactivated influenza  | X <sup>‡,2,3</sup>                     |  |  | X <sup>6</sup>  |
| Tetanus toxoid,<br>reduced diphtheria<br>toxoid, and acellular pertussis<br>(Tdap) | X <sup>‡,4,5</sup>                     |  |  | X <sup>6</sup>  |
| Pneumococcal vaccines  |  | X <sup>II,6</sup>  |  | X <sup>II,6</sup>   |
| Meningococcal conjugate<br>(MenACWY) and meningococcal<br>serogroup B              |  | X*.7   |  | X*1.7   |
| Hepatitis A  |  | X#,8   |  | X#,8  |
| Hepatitis B  |  | X**,9,10   |  | X**,9,10  |
| Human papillomavirus (HPV)**   |  |  |  | X <sup>++,11,12</sup>   |
| Measles-mumps-rubella  |  |  | X**,13,14                              | XII   |
| Varicella  |  |  | X <sup>##</sup> ,13,15,16              | X**   |

# Timing and Protection of Vaccination

### Flu vaccine

- Safe for you and your fetus during any trimester of pregnancy
- Effective at preventing severe flu illness during pregnancy

# How does it protect my baby?

The flu vaccine creates antibodies that are passed to a fetus, which protect against the flu until a baby can get the flu vaccine at age 6 months.

# Cough vaccine (Tdap)

- Safe for you and your fetus
- Recommended
   between 27 weeks and
   36 weeks of each
   pregnancy

# How does it protect my baby?

The Tdap vaccine creates antibodies that are passed to a fetus, which protect against whooping cough until a baby can get a whooping cough vaccine at age 2 months.

### **COVID-19 vaccine**

- Safe for you and your fetus during <u>any</u> trimester of pregnancy
- Effective at preventing severe illness from COVID-19

# How does it protect my baby?

The COVID-19 vaccine creates antibodies that are passed to a fetus, which may protect against COVID-19 until a baby can get a COVID-19 vaccine at age 6 months.

# Pfizer RSV vaccine

- Safe for you and your fetus
- Recommended if you are between 32 and 36 weeks of pregnancy during RSV season (September through January)

# How does it protect my baby?

The RSV vaccine creates antibodies that are passed to a fetus, which protect against RSV for the first 6 months after birth.

# Safety and Evidence

Extensive studies confirm safety

No increased risk of adverse outcomes

Benefits far outweigh risks

Supported by ACOG, CDC, WHO

# Protect yourself and your baby. Get your recommended vaccines during each pregnancy.

Make sure everyone who is around your baby is up to date on their vaccines too. This helps protect your baby from illness.

### **Vaccines: Get The Facts**

### **FACT**

If you get the flu or COVID-19 during pregnancy, you can become much sicker than nonpregnant people who get these infections. Vaccines offer you the best protection.

### **FACT**

Babies younger than 3 months have the highest risk of severe disease and death from whooping cough. Babies cannot be vaccinated until they are 2 months old. So the best way to protect your newborn is by getting the Tdap shot during pregnancy.



Getting vaccinated during pregnancy will not make you sick or harm your fetus. Research shows that vaccines do not cause pregnancy problems, birth defects, or autism in children. Vaccines have been used for many years in millions of pregnancies.



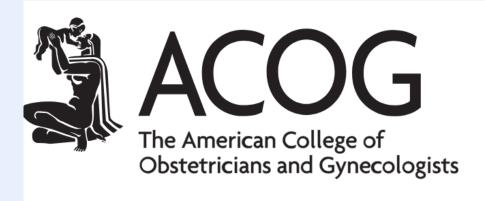


"Maternal immunization is a safe, evidencebased practice that saves lives. Obstetriciangynecologists and other prenatal care providers play a critical role in recommending and administering vaccines to protect both pregnant individuals and their babies." – ACOG, Maternal Immunization Task Force



### Resources

- ACOG Practice Advisory (2022)
- ACOG Infographic: Vaccines During Pregnancy



# Thank you!





Questions? Contact nbracero@progyn.org