Protecting Pregnant Healthcare Workers

To the Editor:

The letter from Belingheri et al \(^1\) fairly raised the issue of the protection of pregnancy in health care workers (HCWs) during the Corona Virus Disease 19 (COVID-19) pandemic. The issue is certainly relevant because women make up the majority of HCWs and pregnancy must be protected, in this as well as other occupations.

In general, in case of job-specific biological risk, pregnant women and their foetus represent a target population of specific preventive measures. However, as stated by the Authors, \(^2\) little is still known about the susceptibility to and the severity of COVID-19 during pregnancy. Although there are no studies indicating that pregnant women are more susceptible to contracting COVID-19 infections, physiological and mechanical changes in pregnancy increase susceptibility to infections in general, particularly when the cardiorespiratory system is already affected, which in turn may prompt a rapid progression to respiratory failure in pregnant patients. \(^3\) In addition, a recent extensive systematic review and meta-analysis, indicated that pregnant women with COVID-19 are at higher risk for admission to intensive care units (OR = 1.62, CI95% 1.33 to 1.96) and invasive mechanical ventilation when compared with non-pregnant women (OR = 1.88, CI95% 1.36 to 2.60). \(^3\) But both those comparisons are based only on four studies and it is not clear how pre-existing individual risk factor for COVID-19 infection severity, such as BMI, age and diabetes have been taken into account.

According to Belingheri et al, \(^1\) we strongly advice that pregnant women should not be exposed to any general or occupational environment at higher risk for SARS-CoV-2 infection, especially in hospital settings, where pregnant HCWs are likely to get into contact with confirmed or suspected COVID-19 patients.

In many European countries, including Italy, it is among the employer’s legal obligations to protect women from occupational pregnancy-threatening hazards, encompassing the biological hazards. In Italy the current legislation (Legislative Decree 151/2001 on the protection and support of maternity and paternity, and Legislative Decree n. 81/2008 on health and safety at work), requires the employer to exploit some administrative preventive measures, which in order are: (i) the modification of the work duties and/or work destination, in order to minimize the occupational risks for pregnant women, with no change in their salary and professional role; (ii) only if this is not possible the Local Inspectorate grants an early paid maternity leave from work.

For these reasons, if properly applied, current legislation already provides an effective protection system for pregnant women, even in the critical context of health care during the current COVID pandemic. As regards specifically the work of the pregnant HCW during the COVID-19 pandemic, “continued employment should only be considered if the risk of infection in the workplace does not exceed that of the general population.” \(^4\)

Pregnancy is an important as well as delicate stage in the life of female workers and should be protected not only as an individual condition but also as an indispensable value for a modern and fair society, in a balance between the right to work and the protection of the integrity and safety of both the mother and the foetus.

Nicola Magnavita, MD
Director of the Postgraduate School of Occupational Health
Università Cattolica del Sacro Cuore, Rome, Italy

Matteo Bonzini, MD
Occupational Medicine
University of Milan
Milan, Italy

Rudy Foddis, MD
Occupational Health
University of Pisa
Pisa, Italy

Nicoleta Debarbieri, MD
Occupational Health
University of Genoa
Genoa, Italy

Paola Del Bufalo, MD
Occupational Health
Local Sanitary Unit
Rieti, Italy

Francesca Larese Filon, MD
Occupational Health
University of Turin
Turin, Italy

Gianottommaso Pagliaro, MD
Occupational Health
Local Sanitary Unit
Bergamo, Italy

Matteo Riva, MD
Occupational Health
Local Sanitary Unit
Padua, Padua, Italy; President of the Working group “Pregnancy and work” – Italian Society of Occupational Medicine

Giovanna Spatari, MD
Occupational Health
University of Messina
Messina, Italy; President of the Italian Society of Occupational Health

REFERENCES
1. Belingheri M, Paladino ME, Riva MA. Risk exposure to coronavirus disease 2019 in pregnant healthcare workers. J Occup Environ Med. 2020;62:e370. doi: 10.1097/JOM.0000000000001881.
2. Dashraath P, Wong JLI, Lim MXK, et al. Coronavirus disease 2019 (COVID-19) pandemic and pregnancy. Am J Obstet Gynecol. 2020;222:521–531. doi: 10.1016/j.ajog.2020.03.021.
3. Alloitey J, Stalling E, Bonet M, et al. Clinical manifestations, risk factors, and maternal and perinatal outcomes of coronavirus disease 2019 in pregnancy: living systematic review and meta-analysis. BMJ. 2020;370:m3320. doi: https://doi.org/10.1136/bmj.m3320.
4. Michels G, Oehmann U, Cranen R. Possibilities of employment of pregnant women in the health care system in association with SARS-CoV-2. Med Klin Intensivmed Notfmed. 2020;115:486–487.