A-033

Preliminary findings on inadvertently exposed pregnancies to COVID-19 mRNA vaccine in Kedah Darul Aman

Nabila Arfah MY, Murizah MZ

Department of Obstetrics and Gynaecology, Hospital Sultanah Bahiyah, Alor Setar, Kedah

ABSTRACT

Introduction: Coronavirus disease 2019 (COVID-19) resulting from infection of severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2) was first identified in 2019. In less than a year, various vaccines have been developed and distributed worldwide, Malaysia included. According to the Malaysian National COVID-19 Immunisation Programme, the current recommendation for vaccination in pregnant person are for those in between 14 to 33 weeks of gestation. Most of our vaccines in Phase 1 of the immunisation programme were given to healthcare workers, hence a large portion of women of reproductive age were involved. However, there is limited data available on the risks and safety of COVID-19 vaccine during pregnancy, including those with inadvertent exposure to the vaccine. **Objectives:** To ascertain the local demographic data on outcomes of inadvertent exposure of COVID-19 vaccine during pregnancy among healthcare workers in the state of Kedah. **Methods:** This is a prospective observational review among those who received mRNA COVID-19 vaccine and subsequently only found to be pregnant after receiving either the first, second or both doses of vaccine. **Results:** Up until 31st May 2021, there are 45 women who received the vaccine found to be pregnant – with 1 ectopic pregnancy, 1 molar pregnancy and 5 miscarriages reported. The data collection process is still ongoing and among the outcomes that we would like to analyse further will be – outcomes of the vaccine in the first, second and third trimester pregnancies, including early pregnancy complications, teratogenicity, number of live births and birth complications. **Conclusion:** There is limited data currently available on the risks and safety of COVID-19 vaccine in pregnancy, therefore obstetricians need to outweigh the risk of vaccine to the pregnant person and fetus versus risk of COVID-19 infection itself. Further follow up and continuous monitoring is needed to assess maternal and neonatal outcomes associated with maternal COVID-19 vaccination, including in preconception and earlier stages of pregnancy.

A-034

Amniotic fluid embolism – A deadly assassin striking twice: A case series

Ahmad NMB, Wagimon W, Yahaya Z

Hospital Serdang, Selangor, Malaysia

ABSTRACT

Introduction: Amniotic fluid embolism is a rare but potentially fatal cause of maternal collapse and accounts for up to 10% maternal mortality. The response is similar to an anaphylactic reaction rather than a typical embolism and the diagnosis is typically confirmed at autopsy. In our centre there were 2 cases of fatal amniotic fluid embolism within 2 days, and both had a full autopsy. In this report, risk factors, presentation and management will be examined. **Case Description:** *Patient 1:* A 36-year-old, primigravida with DCDA twin pregnancy conceived through IVF. She had multiple admissions for indeterminate APH, and she was noted to have cervical shortening at 29 weeks and planned for inpatient monitoring but unfortunately required a Caesarean section after 5 days. However, intraoperatively the patient had cardio-respiratory collapse after delivery of second twin. Despite immediate intubation and resuscitation, the patient ultimately succumbed after 4 hours. *Patient 2:* A 35-year-old G3P2 at 35 weeks gestation who collapsed at home after her membranes ruptured. She was under follow up for polyhydramnios and a diagnosis of fetal trisomy 21 and had an amnioreduction at 31 weeks. She arrived already intubated and on inotropic support and was diagnosed as amniotic fluid embolism with abruptio placenta. Shortly after arriving, her blood pressure became unrecordable and despite resuscitation patient succumbed after 66 minutes. **Discussion:** Amniotic fluid embolism is a potentially fatal obstetric emergency. Examining the risk factors, initial management and examining areas of possible deficiencies will help prepare practitioners.