Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

3. Meijer WJ, Wensing AM, Bruinse HW, Nikkels PG. High rate of chronic villitis in placentas of pregnancies complicated by influenza A/H1N1 infection. Infect Dis Obstet Gynecol 2014;2014:768380.

 https://doi.org/10.1016/j.ajog.2021.05.037

Professionally responsible COVID-19 vaccination counseling—response to Chervenak et al

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TO THE EDITORS: In their article, Chervenak et al[1] designated their favored approach to counseling pregnant women for COVID-19 vaccination as "professionally responsible." However, their stance diverges in important aspects from product licenses and guidance issued by professional bodies. Their approach aims to increase vaccine uptake. Their view is rooted in willingness to view caution as necessarily or primarily a legalistic concern, coupled with their readiness to substitute experiment-based scientific evidence with inferences or suppositions.

The seriousness of COVID-19 is not in doubt. Remarkable scientific progress enabled vaccine development and emergency use authorization in record time. The technology used in most COVID-19 vaccines is novel. There is cause for optimism, but vaccines have not been tested in pregnant women. Emerging information emphasizes the value of surveillance and monitoring, which should include long-term fetal outcomes. The authors built their argument based on extrapolations from short-term data derived from research on nonpregnant adults. They need to provide an account of how this lower standard of proof can be adopted without undermining medicine's claim to be rooted in scientific rigor.

Doctors have considerable influence on patients' choices. This stems from the trust patients bestow on doctors. Chervenak et al[1] view this trust as an opportunity to channel patients' choices. However, they need to address the concern that their approach risks undermining the fiduciary relationship and the essence of trust. In addition, they need to provide an account as to how to reconcile "respect" for autonomy with advocating persistent efforts to sway women toward a particular choice or to reverse expressed preferences. Counseling for consent ought not to be grounded in a conviction that particular choices are irrational or irresponsible. Thus, Chervenak and colleagues need to describe how to reconcile the tension inherent in providing care with the standpoint that pregnant women who hesitate about vaccination are free riders and, as such, morally reprehensible.

At the core, Chervenak et al[1] seek to influence value judgments. Pregnant women and care providers face a dilemma when balancing the risks to public health, the individual woman, and the unborn baby. It is difficult to see how labeling a particular stance as "responsible" can be helpful. Alternatively, Chervenak and colleagues should clarify why they believe pregnant women need to provide a reason or justify their choice. ■

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REFERENCE

1. Chervenak FA, McCullough LB, Bornstein E, et al. Professionally responsible coronavirus disease 2019 vaccination counseling of obstetrical and gynecologic patients. Am J Obstet Gynecol 2021;224:470–8.

 https://doi.org/10.1016/j.ajog.2021.05.046

Reply to professionally responsible COVID-19 vaccination counseling

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We thank Dr Habiba for his interest in our article.[1] Dr Habiba claims that our article failed to be "rooted in scientific rigor" because "vaccines have not been tested in pregnant women" in a randomized controlled clinical trial. In February 2021, Pfizer and BioNTech embarked on studying the effects of COVID-19 vaccination on pregnant women. Before the results of trial data, it was necessary to protect pregnant and lactating patients through emergency access and advocate for their participation in research. Recently, the US Centers for Disease Control and Prevention has endorsed recommending COVID-19 vaccination to pregnant women, relying on the best available evidence.[2] When we submitted our article and to date, the best