



Published By : PERINASIA
The Indonesian Society of Perinatology

Early detection of Fetal Acrania on first-trimester sonography: a case report



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ABSTRACT

Introduction: The SARS-CoV-2 pandemic has affected every part of the population, including pregnant mothers, breastfeeding mothers, and infants. There is an inadequate comprehension of SARS-CoV-2 transmission potential as of now. As expected, it will result in anxiety among the public, including a specific issue such as breastfeeding practice for the suspected or confirmed novel coronavirus infection. This study aimed to assess whether such anxiety was present in a population of patients that routinely visit Kasih Medika clinic.

Methods: This is a simple study conducted on August 5-10, 2020. This study used a questionnaire instrument with samples of pregnant and postpartum mothers. The questionnaire includes a question regarding the anxiety surrounding breastfeeding, visiting the clinic and their everyday activity.

Results: We reported that COVID-19 has an impact on the breastfeeding plans from the respondent's questionnaire. All respondents felt anxious about COVID-19, although only 18% of patients reduce their routine visits to Kasih Medika, while the rest keep visiting as scheduled. Eighty-six percent of respondents restricted their outdoor activities during the COVID-19 pandemic. The COVID-19 pandemic causes 27% of the respondents to feel afraid of their breastfeeding plans. However, in the primigravida population, 45.45% of respondents were afraid of their breastfeeding plans. Meanwhile, in the multigravida and postpartum respondents, 90.90% were not afraid about their breastfeeding plans during the COVID-19 period.

Conclusion: COVID-19 pandemic brings a certain degree of anxiety to the mothers, including anxiety of safety during breastfeeding practice. Despite the risk of transmission, breastfeeding has more benefits than disadvantages. Breastfeeding makes the infant have a good immune system, which prevents any disease, including COVID-19. Breastfeeding during the COVID-19 is still recommended under health protocol.

Keywords: Breastfeeding, COVID-19, infant, transmission, women.

Cite This Article: Sanjaya, I.N.H., Pемыayun, C.I.M., Mintariani, F.S., Sakuntari, M.D.V., Purwanti, N.W.D., Gianni, N.P.N., Putri, N.L.M.D.M.C., Satriani, N.L.M.D.L., Pирgantari, N.K.A., Padmawati, N.L.P.Y., Agustini, A.A.W.P. 2021. Early detection of Fetal Acrania on first-trimester sonography: a case report. *Indonesian Society Of Perinatology* 2(1): 9-11. DOI: 10.51559/inajperinatol.v1i2.9

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Received: 2020-10-22

Accepted: 2021-01-27

Published: 2021-02-26

INTRODUCTION

The year 2020 has been an unexpected yet deadly year, thanks to the COVID-2019 pandemic. It was brought about by the SARS-COV-2, a virus that was initially recognized in Hubei-China in December 2019. It spread universally, representing a critical public health challenge and bringing health systems worldwide to their knees.¹ At the time World Health Organization (WHO) announced the pandemic state, still a little was known

about the nature of the virus. Indeed, even less was how it could impact an especially vulnerable population, such as pregnant women, breastfeeding women, and newborn children. Since the early days of the pandemic, the WHO has been continuously finding proof of the impact of COVID on mothers and infant's wellbeing.^{2,3}

In spite of the fact that information is inadequate with regards to the virus, some reassuring data was arising. Early information upholds that pregnant

women infected by the novel Coronavirus will probably not pass it to their fetuses across the placenta during pregnancy.⁴⁻⁶ Several small investigations of pregnant women infected with COVID-19 found no evidence of vertical transmission in light of the fact that no baby tested positive upon birth. Moreover, the infection was not identified in the amniotic liquid, umbilical cord blood or placental tissue.⁴ Although few infants infected by the novel Coronavirus have been accounted for, it remains unclear whether they

were infected previously, during, or after delivery and by which transmission mechanism.^{4,7,8} Most likely, the respiratory agent, the SARS-COV-2, in the infants was originated during the postpartum care or delivery contaminated with mother feces (anal contamination).⁷

Due to breastfeeding practice encouraged by WHO, it should be expected that routine breastfeeding practice may pose a source of anxiety for the mothers and family whether this practice would increase the risk of transmission to the seemingly vulnerable neonates. This small study aimed to assess whether such anxiety was present in a population of patients that routinely visit Kasih Medika clinic.

METHODS

This study focuses on the effect of the COVID-19 issue on patient visits and the mothers' desire for breastfeeding. This is a simple study conducted on August 5-10, 2020. This study used a questionnaire instrument with samples of pregnant and postpartum mothers.

RESULTS

The COVID-19 pandemic has a psychological effect on Kasih Medika patients. It can be seen from the results all respondents felt anxious with a different stage of anxiety (Figure 1A). COVID-19 only affects 18% of patients to reduce their routine visits to Kasih Medika, while 82% keep visiting as the schedule (Figure 1B). Some patients carry out activity restrictions to prevent transmission of the disease. Eighty-six percent of respondents restricted their activities during the COVID-19 pandemic (Figure 1C). The COVID-19 pandemic had an insignificant effect on breastfeeding plans. This can be seen as only 27% of all respondents feels afraid of their breastfeeding plans (Figure 1D). However, in the Primigravida population, 45.45% of respondents were afraid of their breastfeeding plans. However, in multigravida and postpartum respondents, 90.90% were not afraid about their breastfeeding plans during the COVID-19 period.

DISCUSSION

As per the WHO recommendation, mothers affected by COVID-19 (or suspected COVID-19) can breastfeed their infants as long as they conducted it with proper precautions.^{4,9} Breast milk contains various antimicrobial substances, anti-inflammatory substances, and factors that stimulate the development of immune systems, thus decreasing the risk of respiratory infections.¹⁰ The WHO stresses that breast milk contains all the supplements in suitable extents fundamental for newborn development, whether the mothers are infected with COVID-19.⁹ Breastfeeding ensures numerous medical advantages for both the mother and infant, and it is perceived as the ideal nourishment for youngsters in the first half-year of life.¹⁰ Also, breastfeeding can reinforce the connection between the mother and the infants.¹¹ The current WHO proposals demonstrate that mothers should give exclusive breastfeeding to their children during the first six months of life. Women with confirmed or suspected COVID-19 are urged to breastfeed if no obstacle or limitation present. In any case, precautions should be taken to minimize potential transmission. Room sharing and continuous mother-baby proximity are suggested as an essential factor for setting up good breastfeeding even for mothers with COVID-19 as well, given that proper respiratory and skin hygiene measures are taken.²

If the mothers cannot breastfeed attributable to serious ailments brought about by COVID-19, they should get support from a skilled medical professional. They might be encouraged to give breast milk to their newborn through safe elective strategies, such as arranging expressed milk or relactation (the way toward restarting a short breastfeeding gap or almost no breastfeeding). On the off chance that is impossible, different options can be thought of, such as the utilization of certified donor milk bank services to ensure that milk and the donors had gone through screening measures.

CONCLUSION

COVID-19 pandemic brings a certain degree of anxiety to the mothers, including

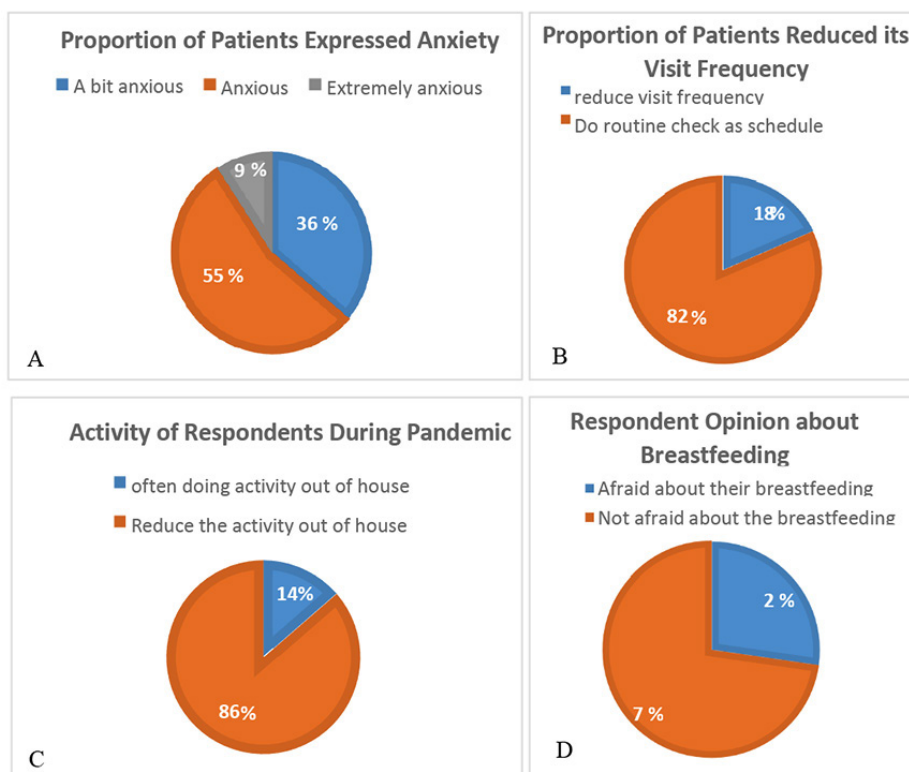


Figure 1. The percentage of the patient expressed anxiety (A), reduced clinic visits frequency (B), reduce outdoor activity (C) and concern about breastfeeding (D) during the COVID-19 pandemic.

anxiety of safety during breastfeeding practice. Despite the risk of transmission, breastfeeding has more benefits than disadvantages. The WHO firmly underpins breastfeeding practice during COVID-19, which is key for guaranteeing infants' wellbeing and development. Further efforts should be made to advise and support mothers to conduct breastfeeding practice properly in any event, even when the mother has confirmed or suspected COVID-19 infection. The health care provider should promote and support breastfeeding by implementing protocol hygiene during the care of a pregnant and breastfeeding woman during the COVID-19 pandemic.

CONFLICT OF INTEREST

All authors declare that there is no conflict of interest.

AUTHOR CONTRIBUTION

All authors have contributed equally during all phases of the study, including, conducting the study, drafting and revising the manuscript, giving final approval, and agreeing to be accountable.

FUNDING

All authors have no external support or additional funding to report.

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