

SARS- or MERS-CoV outbreak (120). However, there has been concern regarding the impact of SARS-CoV-2/COVID-19 on pregnancy. Researchers have mentioned the probability of in utero transmission of novel SARS-CoV-2 from COVID-19-infected mothers to their neonates in China based upon the rise in IgM and IgG antibody levels and cytokine values in the blood obtained from newborn infants immediately postbirth; however, RT-PCR failed to confirm the presence of SARS-CoV-2 genetic material in the infants (283). Recent studies show that at least in some cases, preterm delivery and its consequences are associated with the virus. Nonetheless, some cases have raised doubts for the likelihood of vertical transmission (240–243).

COVID-19 infection was associated with pneumonia, and some developed acute respiratory distress syndrome (ARDS). The blood biochemistry indexes, such as albumin, lactate dehydrogenase, C-reactive protein, lymphocytes (percent), and neutrophils (percent) give an idea about the disease severity in COVID-19 infection (121). During COVID-19, patients may present leukocytosis, leukopenia with lymphopenia (244), hypoalbuminemia, and increase of lactate dehydrogenase, aspartate transaminase, alanine transaminase, bilirubin, and, especially, D-dimer