

Tennessee mother dies of COVID-19 one month after childbirth

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A Dickson County, Tennessee mother died of COVID-19 this week after giving birth to a baby she never had a chance to hold, both victims of a homicidal social policy of herd immunity which has allowed the deadly virus to spread far and wide.

Amanda Perry, 36, had been admitted in mid-September to a local hospital emergency room with COVID-19. She was 32 months pregnant at the time and an emergency C-section was performed. Placed on a ventilator, she was then eventually airlifted to Richmond, Virginia for increased COVID-19 support and treatment in hopes of saving her life.

Her husband, Billy, had driven to Richmond and rented an apartment to be near his wife, who died October 18.

The baby, Nolan, remained in the Neonatal Intensive Care Unit (NICU) for a month and is reportedly doing well, living with his father, grandmother and two older brothers.

“We had three miscarriages before having Nolan,” Billy told NewChannel5. “She loved being a mom, she was put on this earth to be a mom.”

Amanda and Billy had a total of five children from previous marriages, one a special-needs child. No doubt the couple faced intense economic pressures during the pandemic.

The family lived in White Bluff, Tennessee, but Amanda had been working as a hair stylist in Franklin, Tennessee. Franklin is the county seat for Williamson County, Tennessee, the richest county in the state. It is 31 miles away and a 48-minute drive with “light traffic,” according to a Microsoft mileage search.

Williamson County is noted for the large number of retail, service and hospitality industry workers who commute from surrounding counties because it is impossible to live in the county where they work with

what they are paid, often having to commute for almost two hours a day.

The median cost of a three-bedroom home in Williamson County—possibly the right size for a family the size of Amanda’s and Billy’s—is \$439,900.

Amanda was also under pressure over vaccination. Perhaps because she had suffered three previous miscarriages, she wanted to wait for the vaccination, a friend told the media. “She wanted to be vaccinated but did not want to risk the pregnancy,” Carlene Bennett told News4 Nashville. “She said she was going to get vaxed after she gave birth, but time ran out.”

It was not reported how Amanda contracted COVID-19. It is possible with school-age children one might have brought it home. It was not reported if the family had been tested.

It is also possible she contracted the virus at work. Working in a beauty and hair salon with many different clients coming in and out increases the possibility of exposure. It is also often next to impossible for clients to remain masked when they are having their hair shampooed, styled or cut.

Amanda, like millions of other workers, was forced to work and live with increased risks.

“There are a lot of exposures, and pregnant women don’t have the luxury, in general, usually, of being able to really isolate themselves,” Dr. Ryan Loftin, a Minnesota specialist in obstetrics, gynecology and maternal fetal medicine told the media in an interview in August with CBS Minnesota.

Dr. Loftin noted that at that point, 86 percent of cases of COVID-19 in pregnancies involved unvaccinated women. Although the science does not support it, expecting mothers have avoided getting vaccinated at a higher rate than other sections of the population.

“The vaccines are safe and effective, and it has never

been more urgent to increase vaccinations as we face the highly transmissible Delta variant and see severe outcomes from COVID-19 among unvaccinated pregnant people,” Centers for Disease Control and Prevention (CDC) Director Rochelle Walensky noted in August.

The CDC recommends not only pregnant mothers, but also breast-feeding mothers and even those considering pregnancy, get the vaccine.

CDC analysis of current data on vaccinations before 20 weeks of pregnancy indicates no increased risk of miscarriages. Miscarriage typically occurs in 11 to 16 percent of pregnancies before 20 weeks. The study of the 2,500 pregnant women who received vaccinations for COVID-19 reported a miscarriage rate of 13 percent.

“It can be as severe as it is in anyone else, requiring intubation, mechanical ventilation and even including deaths of pregnant women because of severe illness,” Dr. Lofton noted of the threat of COVID-19.

“Pregnant women are at increased risk for severe disease if they do develop infection, and our data have demonstrated an increased risk for mortality with COVID-19 infection at the time of childbirth compared to childbirth without COVID-19 infection,” Dr. Jennifer Jolley, a study author and OB-GYN with the University of California-Irvine Medical Center, told *U.S. News and World Report*.

“I have seen some pregnant women get really sick. I mean, I have seen some die,” Dr. Mark Turrentine, an obstetrics professor at Baylor College of Medicine, and co-chair of a COVID-19 work group for the American College of Obstetricians and Gynecologists (ACOG), told NPR. “And you know, you go into this business as an obstetrician gynecologist because patients are young and they are healthy. And most of the time you have great outcomes. This is a bad virus.”

It is a bad virus indeed, but the ruling class is determined to force workers back to work, shoulder to shoulder, 12-hours a day pumping out profits even as the pandemic continues to kill more than 1,500 people every day in the United States. Workers are getting sick on the assembly line, poultry farm, meat processing facilities, supermarkets and at the hair salons. More than 750,000 lives have been needlessly lost over the last 18 months.

While workers are exposed to the highly contagious

Delta variant, the Democrats and Republicans, along with their union allies, pack unvaccinated children into poorly ventilated, overcrowded classrooms to catch the virus and take it back into their homes and communities.

Only through the organization and mobilization of the world’s working class, armed with science, can the necessary steps be taken to bring about the global elimination of COVID-19.

The October 24 webinar sponsored by the *World Socialist Web Site* and the International Workers Alliance of Rank-and-File Committees (IWA-RFC) will bring together scientists, public health specialists and working people who are all engaged in the struggle to save lives. The discussion will be aimed at educating, clarifying and laying the basis for effective mass action to end the pandemic.

We urge all of our readers internationally to register today, invite your coworkers, friends and family, and promote the event as widely as possible on social media this weekend.



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