

Group B Streptococcus (GBS) In Pregnancy

What is GBS?

- It is a bacteria that can cause infection in both the mother and the baby.

What kinds of infection does it cause?

- In most people, there is no illness at all
- In pregnant and postpartum women, it can cause an infection in the bladder or uterus
- In babies, infection is rare but can be serious
 - Of the small number of babies who get sick from GBS:
 - 80% are early GBS infections (birth to 1 week) and include:
 - Pneumonia (infection in the lungs)
 - Meningitis (infection around the brain and spinal cord) [1]
 - Sepsis (infection through the whole body) [SEP]
 - 20% are late GBS infection (between 1 week and 3 months of age) but unfortunately, treatment in labour does not reduce the risk of late GBS

How is it found?

- It is found by taking a swab of the lower vagina and rectum around the 35th to 37th week of pregnancy OR
- It may be found by checking for infection in a urine culture test taken at any time in your pregnancy.

What if I have GBS?

- If GBS is detected on the vaginal swab, you will be given intravenous antibiotics (usually penicillin) after your water breaks or when you are in active labour. It does not help to give antibiotics before labour.
 - At the hospital, an intravenous line will be started, and you will be given your first dose of antibiotic. This will be repeated until the birth of your baby.
- If GBS is detected in your urine, it is treated whenever the bacteria is found with oral antibiotics. A follow-up urine test should be done 2-4 weeks after treatment to be sure the bacteria is gone. You will also receive intravenous antibiotics in labour.

What are the chances of my baby getting an infection?

- If a mother has GBS at the time of giving birth and does not get treated, 1 in 200 (0.5%) babies may get sick.
- With antibiotic treatment, only 1 in 4,000 (0.025%) babies may get sick.

Is it harmful to receive antibiotics?

- There is a 1 in 10 chance of a mild allergic reaction to penicillin. This can be a pink spotted rash that may be itchy.
- There is only a 1 in 10,000 chance of a person developing a serious, life-threatening allergic reaction. If a woman is allergic to penicillin, there are other antibiotics that can be used.
- All antibiotics can cause other, usually minor, problems such as diarrhea or vaginal yeast infections.
- After the baby is born women may have a greater chance of getting a yeast infection in their nipples (nipple candidiasis) that can impact breastfeeding but is treatable with anti-yeast cream.

So, Now What?

If you are found to have GBS when tested, you should come to the hospital when:

1. Your water breaks (membranes rupture).

Please call the hospital birthing area at **604-244-5134** before going into the hospital. At the hospital, an intravenous will be started and you will be given your first dose of antibiotic. This will be repeated until the birth of your baby.

2. You are in active labour.

If this is your first baby, the contractions come every few minutes, last 40 – 60 seconds and have been getting stronger and closer together for 2 hours. If you have had a baby before, the contractions have been this strong and long for 1 hour.

**Please call the Birth Centre of Richmond Hospital
604-244-5134
before going to the hospital.**