



GROUP B STREPTOCOCCAL INFECTION

GBS (Group B strep) or streptococcus agalactiae, has emerged as the most common cause of neonatal infections in the United States. The occurrence rate is approximately 1.8 per 1,000 live births annually. GBS is a “normal” bacteria that grows in the intestines, but it can also be found in the vagina.

Vaginal growth of GBS occurs in approximately 5-40% of pregnant women. The woman herself has no symptoms of this bacterial organism. Transmission of GBS to the newborn occurs through exposure during a vaginal delivery. It is estimated that approximately 40-70% of colonized women with this bacterial organism may transmit the GBS to their offspring.

Despite such a high rate of passing this bacteria on, only 1-2% of these newborns will develop severe infection from this bacteria.

Patients at increased risk for newborn infection include: prematurity, low birth weight, maternal fever during the delivery, and rupture of membranes for more than 18 hours. Women who test positive for GBS should be treated with antibiotics during labor. This will prevent approximately 95% of newborn Group B strep infections.

Women who have a planned cesarean section do not need antibiotics during delivery, but need to be tested for GBS because preterm labor or rupture of membranes may occur before the planned cesarean section.