HOW DOES HAVING ANTIBIOTICS IN LABOUR HELP?

Giving antibiotics to the mother when in labour, before baby is born, helps prevent the Group B Strep bacteria spreading to baby. Penicillin crosses the placenta and helps to keep baby from getting the infection. Giving mother antibiotics before labour has started, doesn’t appear to help nor does waiting until baby is born as this may be too late.

However, even if you have the antibiotics, baby will still need to be observed closely, especially in the first 24 hours. Baby will remain with you but will have their temperature and respirations regularly checked. Staff will be looking for signs of infection.

HOW WILL I KNOW IF MY BABY HAS BEEN AFFECTED BY GROUP B STREP BACTERIA?

They often have signs of infection in the first 24 hours after birth.

Symptoms include; if your baby shows signs of poor feeding, sleepiness, paleness, floppiness, fever or breathing difficulties. As with all babies, any signs of baby being unwell must be checked URGENTLY.

WHAT IS THE TREATMENT FOR A BABY WITH GBST INFECTION?

If the infection is caught early and your baby is full-term, most babies will completely recover with intravenous antibiotic treatment. Of the babies who get sick, about 1:6 can have serious complications.

IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE DO NOT HESITATE TO ASK YOUR MIDWIFE OR DOCTOR FOR AN EXPLANATION.

FEEDBACK

We encourage feedback and assurance is given that comments will not adversely affect your current or future care.

You can do this:
- through discussion with MidCentral Health staff providing your care
- by completing “Tell us what you think...” pamphlets available from all services
- by contacting our Customer Relations Co-ordinator, PO Box 2056, Palmerston North or phone (06) 350 8980
- by contacting a Health and Disability Commissioner Advocate, phone 0800 112 233.

REFERENCES:


WHAT IS GROUP B STREP?

Group B Streptococcus is a bacteria that is normally found in the digestive system. It is also found in the vagina of about 20% of all women, not just those who are pregnant.

There are occasions when it can be found in the urinary system. In most instances this bacteria does not cause infections in women.

WHY CAN GROUP B STREP BE A PROBLEM FOR PREGNANT WOMEN?

Occasionally, it may cause bladder infections for women. It can also occasionally cause a postpartum infection in the uterus (womb).

The main concern is that baby may get the Strep B bacteria as it passes through the vagina (birth canal) which may cause baby to become unwell.

However, only 2% of babies go on to be infected when passing through the birth canal.

WHAT ARE THE RISK FACTORS FOR HAVING GROUP B STREP?

Babies at greatest risk for infection are those:

- Born prematurely (less than 37 weeks of gestation)
- Born after the bag of waters has been broken for 18 to 24 hours or more before delivery
- Born to a woman with a history of a bladder infection from Group B Strep bacteria in their pregnancy
- Born to a woman who had a previous child infected with Group B Strep
- Born to a woman with a fever during labour (37.8°C or higher)
- Whose mother found incidentally to be a Group B Strep Carrier.

HOW DOES GROUP B STREP INFECTION AFFECT MY BABY?

Newborn babies do not have well-developed immune systems and can develop severe infections from Group B Strep bacteria.

In 98% of cases that the mum is carrying the infection, baby will not be affected.

HOW CAN INFECTION FROM GROUP B STREP BE PREVENTED?

There are things that can be done to reduce the risk of Group B Strep infections for both you and your baby. We offer all pregnant women screening tests to detect this bacteria. In early pregnancy a urine sample will be taken to see if you have any of this bacteria in your urine.

However, occasionally the baby may become severely unwell with pneumonia or a blood infection, and this can happen quite suddenly. This may occur while the woman is in labour but most likely in the 24 hours following birth.

Between 35 and 37 weeks into your pregnancy your Midwife or Doctor will offer a Group B Strep swab test. This is where a swab, similar to a cotton bud but longer, is taken in one sweep from inside the vaginal entrance, across the perineum and into the anus (back passage). You can do this yourself. The swab is sent to the lab to see if the Group B Strep bacteria is present and your Midwife or Doctor will be sent the results.

It is important to remember that Group B Strep is typically not harmful to you and your baby before you are in labour.

WHAT WILL HAPPEN IF THE SWAB IS GROUP B STREP POSITIVE?

If your vaginal swab is Group B Strep positive, you will be offered antibiotic cover once labour starts, which is either by the onset of regular contractions or if the ‘waters break’. The preferred antibiotic is Penicillin. If you are allergic to Penicillin, we have an alternative antibiotic available called Clindamycin.

The antibiotic is usually given every six hours until baby is born. You can have this either as an intramuscular injection (into a muscle), or as an intravenous injection (into a vein).

If you have Group B Strep in your urine, antibiotics will be offered to you immediately the urine test result is known. It is important that you take the whole course of antibiotics regardless of whether you experience any symptoms of infection.