Group B Strep (GBS) Carrier State in a Pregnant Woman

Group B Strep (GBS, carrier state) is a common infection found in pregnant women. It does not cause any symptoms. It can lead to a serious bacterial infection in a pregnant woman's baby. GBS is not a sexually transmitted disease and is not the same streptococcus bacteria that causes strep throat, which is Group A streptococcus.

CAUSES

This carrier state is caused by bacteria called Group B Streptococcus or "Group B Strep (GBS)." GBS is found in the intestinal, reproductive and urinary tract. It can also be found in the female genital tract, most often in the vagina and rectal areas.

SYMPTOMS

In pregnancy, GBS can be in the following places:

- Genital tract **without** symptoms.
- Rectum **without** symptoms.
- Urine **with or without** symptoms (*asymptomatic bacteriuria*).
  - Symptoms can include pain, frequency, urgency and blood with urination (*cystitis*).

Having the bacteria in these places can lead to:

- Early (*premature*) labor and delivery.
- Prolonged rupture of the membranes.
- GBS infection in the newborn.
- Infection in the following places in the pregnant woman:
  - Bladder.
  - Kidneys (*pyelonephritis*).
  - Bag of waters or placenta (*chorioamnionitis*).
  - Lungs (*pneumonia*).
  - Bloodstream (*septicemia*).
  - Uterus (*endometritis*) – after delivery.
  - Spinal cord (*meningitis*).

DIAGNOSIS

Diagnosis of GBS infection is made by screening tests done in pregnancy. Tests (*cultures*) are done on the vagina, rectum and urine for the bacteria. Cultures to detect the bacteria are usually done if you have any of the problems listed under the SYMPTOMS section above.

TREATMENT

Medicines that kill germs (*antibiotics*) are given if there is GBS infection in the urine. Antibiotics are given during labor to prevent GBS infection of the newborn. Antibiotics are also given if:

- GBS is found in a culture from the vagina, rectum, or urine.
- Infection of the membranes (*amnionitis*) is suspected. Antibiotics are given that will cover all forms of bacteria including GBS.
- Labor begins or there is rupture of the membranes before 37 weeks of the pregnancy and there is a great risk of delivering the baby.
- There is a past history of **an infant born** with GBS infection.
- The culture status is unknown (culture not performed or result not available) and there is:
  - Fever during labor.
  - Pre-term labor (less than 37 weeks of gestation).
  - Prolonged rupture of membranes (18 hours or more)

Treatment of the mother during labor is not recommended when:

- A previous **pregnancy** had a positive culture for GBS.
- A planned Cesarean Section is done and there is no labor or ruptured membranes. This is true even if the mother tested positive for GBS.
- There is a negative culture for GBS screening during the pregnancy, regardless of the risk factors during labor.

The newborn baby will receive antibiotics if the baby tested positive for GBS or has signs and symptoms that suggest GBS infection is present. It is not recommended to routinely give antibiotics to infants whose mothers received antibiotic treatment during labor.

HOME CARE INSTRUCTIONS

- Take all antibiotics as prescribed by your caregiver.
- Continue with prenatal visits and care.
- Return for follow-up appointments and cultures.
- Follow your caregiver's instructions. Take all the medications given for you and your baby.
- Watch the baby closely for fever, poor appetite, listlessness/tiredness, stiff body or neck, trouble breathing and convulsions.

SEEK MEDICAL CARE IF:

- Pain with urination.
- Frequent urination.
- Blood in the urine.

SEEK IMMEDIATE MEDICAL CARE IF YOU DEVELOP:

- An oral temperature of 100º F (37.8º C) or higher, or as directed by your caregiver.
- Pain in the back, side, or uterus.
- Chills.
- Abdominal swelling (*distension*) or pain.
- Pre-term labor (less than 37 weeks of gestation).
- Repeated vomiting and diarrhea.
- Trouble breathing.
- Confusion.
- Stiff body or neck.

SEEK IMMEDIATE MEDICAL CARE FOR THE BABY IF THE BABY HAS:

- An oral temperature of 100º F (37.8º C) or 101º F (38.3º C) rectally or higher, or as directed by your caregiver.
- Poor appetite.
- Lack of action or activity.
- Stiff body or neck.
- Trouble breathing.
- Convulsions.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

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