

Preventing Group B Strep Disease

Group Beta Strep (GBS) is a bacterium that can potentially cause serious illness, such as respiratory distress, sepsis, and even death, in newborns.

The two best ways to prevent GBS disease during the first week of a newborn's life are:

- **Testing pregnant people for GBS bacteria**
- **Giving antibiotics during labor to anyone who is at increased risk**

Testing in late pregnancy:

The American College of Obstetricians and Gynecologists (ACOG) and American College of Nurse-Midwives (ACNM) recommend testing everyone for GBS bacteria when they are 36 through 37 weeks pregnant.

The test is simple and does not hurt. We use a sterile swab ("Q-tip") to collect a sample from the vagina and the rectum. The sample is sent to the laboratory for testing.

People who test positive for GBS bacteria are not sick. However, they are at increased risk for passing the bacteria to their babies during birth. GBS bacteria come and go naturally in people's bodies. Someone may test positive for the bacteria at some times and not others. That is why we want to test everyone late in their pregnancy, close to the time of giving birth.

Antibiotics during labor:

We recommend treating everyone who is at increased risk of having a baby who will develop GBS disease. The antibiotics help protect babies from infection, but *only if given during labor*. Antibiotics cannot be given before labor begins because the bacteria can grow back quickly.

We give the antibiotic by IV (through the vein). The most common antibiotic used is penicillin. However, we can give another antibiotic if you are severely allergic to penicillin.

Antibiotics are very safe. For example, about 1 in 10 people will have mild side effects from receiving penicillin. There is a rare chance (about 1 in 10,000) of having a severe allergic reaction that requires emergency treatment.

Antibiotics are very effective at preventing GBS disease in newborns

Consider the following examples:



Tanya

- Tested positive for GBS bacteria
- Got antibiotics during labor

Her baby has a 1 in 4,000 chance of developing GBS disease.



Emma

- Tested positive for GBS bacteria
- Did not get antibiotics during labor

Her baby has a 1 in 200 chance of developing GBS disease.

Because Emma did not get antibiotics during labor, her baby is 20 times more likely to get GBS disease compared to Tanya's baby.

****Most babies born to people who tested positive for GBS bacteria do not need treatment if the birthing person received antibiotics during labor.**

Strategies proven **not** to work:

The following strategies are not effective at preventing GBS disease in babies:

- Taking antibiotics by mouth
- Taking antibiotics before labor begins
- Using birth canal washes with the disinfectant chlorhexidine