Group B Strep in Pregnancy

What is group B strep (GBS)?
GBS is one of many bacteria that live in our body and usually causes no harm. GBS lives in the stomach, anus, and vagina in about 1 in 4 pregnant women near the time of birth. GBS is not a sexual infection and most people don’t know they have it. If you carry GBS, it doesn’t mean that you have an infection.

How do I know if I carry GBS?
Between 35-37 weeks of your pregnancy, you or your health care provider will collect a sample from the outer part of your vagina and just inside the anus with a sterile Q-tip. If the test comes back positive you will be considered GBS+. Some women have GBS all the time and sometimes it comes and goes.

When does GBS cause infection?
Sometimes newborns get a lung or blood infection from GBS in the vagina during birth. Most babies do not get sick from GBS. But we are careful because newborn babies cannot fight infection as well as older people. Women who have GBS in their vagina during labor can also get an infection in their uterus.

How can we prevent newborn infection from GBS?
If you are GBS+ 5 weeks before birth, it is likely you will still have GBS in your vagina when you go into labor. Your health care provider will recommend that you receive the antibiotic penicillin during labor. We try to give you at least two doses of penicillin before the baby is born to remove GBS from the vagina so your newborn does not get sick.

What if I’m allergic to penicillin?
Penicillin is the best antibiotic for preventing GBS infection. Women who are allergic to penicillin can get different antibiotic medication during labor. Tell your health care provider if you are allergic to penicillin.

Do I have to wait for labor to be treated for GBS?
GBS is usually not harmful to you or your baby before labor. GBS is easy to remove from the vagina, but it is not easy to remove from the stomach. Even if you are treated with medicine before labor, GBS could come back after you stop taking the medicine. It is best to take medication *during* labor to get rid of the GBS in your vagina quickly and keep your baby from getting sick.

GBS can sometimes cause a urinary tract infection during pregnancy. The infection will be treated, and you will also get medication when you are in labor.

**What if I don’t have time to get medication treatment while I’m in labor?**
If you are GBS+ and do not get medication before your baby is born, your baby will be watched closely for signs of GBS infection. Most babies with GBS infection show signs within 48 hours of being born.

**How do I know if my baby has a GBS infection?**
A baby with a GBS infection might:
- Have trouble breathing (including grunting or being pale)
- Be too hot or too cold
- Difficulty feeding
- Be too sleepy to breastfeed

**What is the treatment if my baby has a GBS infection?**
Most babies get well with IV antibiotic treatment if the infection is caught early and the baby is full-term (37-42 weeks). About 1 in 6 babies who get sick can have serious complications. Some babies who are very sick will die. In most cases, if you are GBS+ at the time of birth and are given IV penicillin in labor, the risk of your baby getting sick is very rare (about 1 in 4,000).

**If you are GBS+:**
1. Go to OB Triage right away if you think you are in active labor or if your water bag has broken or is leaking. Plan to get IV antibiotics during labor.
2. Tell the staff in OB Triage that you are GBS+.
3. Tell the staff if you are allergic to penicillin.

**For more information:**
• Centers for Disease Control and Prevention: www.cdc.gov/Features/GroupBStrep/
• March of Dimes: www.marchofdimes.org/complications/group-b-strep-infection.aspx