

Group B Streptococcus (GBS)

Group B streptococcus (GBS) is a type of bacteria that can be found in up to 40% of pregnant women. A woman with GBS can pass it to her baby during delivery. Most babies who get GBS from their mothers do not have any problems. A few, however, will become sick. This can cause major health problems or even threaten their lives.

What Is GBS?

Group B streptococcus (GBS) is one of the many bacteria that usually do not cause serious illness. GBS is commonly found in the gastrointestinal and genital tract. GBS is not a sexually transmitted disease. Although the names are similar, GBS is different from group A streptococcus, the bacteria that causes "strep throat." A person who has the bacteria but shows no symptoms is said to be colonized. If the bacteria is passed from a colonized woman to her baby, the baby may develop GBS infection. This happens to only 1 or 2 of every 100 babies whose mothers have GBS. A pregnant woman who tests positive for GBS will be treated in labor to significantly decrease the chances of passing GBS to her baby during delivery.

Testing for GBS

A culture is done at 36 weeks of pregnancy to test for GBS. This is done by placing a swab in the woman's vagina and rectum to obtain a sample. It should not be painful.

Because GBS colonization is intermittent the test is done towards the end of pregnancy, and is done with each separate pregnancy.

If you had a previous baby with GBS infection or you had GBS detected in your urine during pregnancy, you do not need to be tested at 36 weeks. You will be treated as positive for being colonized with GBS. In women who have planned a cesarean birth, GBS should still be tested for because labor may occur before the planned cesarean birth.

Treatment

To reduce the risk of GBS infection in newborns, all women who test positive for GBS must be treated with intravenous (IV) antibiotics during labor or when their water breaks. Penicillin is the antibiotic that is usually given to prevent GBS in newborns. Another antibiotic may be given if you are allergic to penicillin.

The antibiotics work only if taken during labor. (The bacteria grow so fast that if treatment is given during the pregnancy before the onset of labor, the GBS may grow back.)

In summary,

GBS is fairly common in pregnant women, although very few babies actually become sick from GBS infection. Treatment during labor and delivery may help prevent infection in your baby.