If you require a translation please contact:

Se avete bisogno di una traduzione si prega contattare:

Si usted requiere una traducción de esta información por favor contacte a:

اگر آپ کو اس کے ترجمے کی ضرورت در پیش ہو تو آپ ہم سے رجوع فرمائیں۔

আপনার যদি এই পত্রের অনুবাদের দরকার হয়,
তাহলে দয়া করে যোগাযোগ করুন ঃ

Patient Advice and Liaison Service (PALS)
01932 723553

Ashford Hospital London Road, Ashford, Middlesex, TW15 3AA
Telephone **01784 884488** Facsimile **01784 884017**
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Website: www.ashfordstpeters.nhs.uk

Ashford and St. Peter's Hospitals NHS
NHS Trust

GROUP B HAEMOLYTIC STRIP

Infection Control

PATIENT INFORMATION

FURTHER INFORMATION

If you would like any further information please do not hesitate to discuss with your midwife or doctor in charge of your case. Additional information can also be obtained from Group B Strep Support by calling **01444 416176**
or by logging on to www.gbss.org.uk

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WHAT IS GROUP B HAEMOLYTIC STREPTOCOCCUS?

Group B haemolytic streptococcus is a bacterium which lives in the vagina (birth canal) in about 10-30% of healthy pregnant women. It is almost always harmless to the woman herself. This is known as “being colonised”.

During birth the baby can pick these bacteria up from a colonised mother and occasionally this can cause infection in newborn babies during their first week of life.

For this reason, if we find you are carrying the bacterium, your midwife and doctor will be informed so they can keep a special eye on you and your baby when it is born.

However, significant infection only occurs in 1 baby out of every 200 babies that are colonised with this streptococcus, so the risk is not very high.

WILL THIS BE TREATED?

As it is normally harmless your doctor will only prescribe treatment if it is causing signs of infection, e.g. after delivery.

However, you may be given antibiotics to prevent infection passing to the baby during labour.

The organism can also cause urinary tract infections (cystitis) which will need antibiotics.

WHAT WILL HAPPEN TO ME IN HOSPITAL?

You and your baby may be cared for in a single room. The staff that are looking after you will sometimes wear gloves and aprons and will wash their hands more frequently.

You can also help prevent infection to your baby by washing your hands thoroughly with liquid soap and drying them well before picking him/her up, .

There is no risk to any other healthy individual, including children, so there is no need for your visitors to be restricted.

WHEN YOU AND YOUR BABY GO HOME.

There is still a small risk of infection to your baby until he/she is 3 months old.

It is important that you follow your midwife's guidance on when to wash your hands and how to keep items clean in the nursery.

Symptoms of infection to look out for in your baby are:

- a raised temperature
- your baby becoming lethargic or irritable

For the mother, minor infections can occur occasionally.. You should become concerned about yourself if you have a continuing, smelly vaginal discharge, inflammation in your breasts or a spreading infection in a caesarean wound.

In any of these cases contact your G.P. immediately, as prompt treatment can solve the problem.

OTHER QUESTIONS YOU MAY HAVE FOR THE FUTURE:

How long will I carry this bacterium for?

This is variable. Some women carry it long term, but the majority lose it naturally after a little while, although it may be re-acquired later.

Will this affect future pregnancies?

This is very rare. It is highly likely that this will be the only pregnancy where it is a concern. Remember the baby is not at risk inside the womb. Exposure only starts at birth or in labour.