Streptococcus Carrier



Discussion points for Home birth as a carrier of group B Streptococcus

If you carry GBS, most of the time your baby will be born safely and will not	Initials
develop an infection. However, it can rarely cause serious infection such as	
sepsis, pneumonia or meningitis.	
Infection in the new born is more likely to happen if:	
• your baby is born preterm (before 37 completed weeks of pregnancy) – the	
earlier your baby is born, the greater the risk	
you have previously had a baby affected by GBS infection	
• you have had a high temperature or other signs of infection during labour	
• you have had any positive urine or swab test for GBS in this pregnancy	
• your waters have broken more than 24 hours before your baby is born	
If you are found to carry GBS in your vagina or rectum, treating you with	
antibiotics before your labour begins does not reduce the chance of your baby	
developing GBS infection.	
If you have been offered antibiotics to prevent GBS infection in your baby, these	
should be started as soon as possible after your labour begins, or after your	
waters have broken. They will be given through a drip and continued at regular	
intervals (usually 4-hourly) until your baby is born.	
Use of IV antibiotics in labour reduces the incidence of your baby being affected	
by GBS from 1:400- 1:4000	
We cannot offer IV antibiotics in the home birth setting and therefore would	
recommend giving birth in the hospital.	
If you received antibiotics through a drip in labour at least 4 hours before giving	
birth, then your baby does not need special monitoring after birth. You may be	
able to have a 6hr discharge from hospital.	
If your baby is felt to be at higher risk of GBS infection and you did not get	
antibiotics through a drip at least 4 hours before giving birth, then your baby will	
be monitored closely for signs of infection for at least 12 hours. This will include	
assessing your baby's general wellbeing, heart rate, temperature, breathing and	
feeding.	
If you have previously had a baby affected by GBS infection, then your baby will	
be monitored for 12 hours' even if you had antibiotics through a drip in labour.	
Unfortunately we are unable to do this monitoring in the home setting due to the	
frequency of monitoring required.	
This condition can cause sudden and unpredictable collapse in the baby and in	
this event immediate transfer to hospital would be necessary.	

Group B Strep Support (GBSS): www.gbss.org.uk RCOG Green-top Guideline No. 36, Prevention of Early-onset Neonatal Group B Streptococcal Disease: www.rcog.org.uk/en/guidelines-research-services/guidelines/gtg36

NICE clinical guideline CG190, Intrapartum Care for Healthy Women and Babies: www.nice.org.uk/guidance/cg190 NICE clinical guideline CG149,