How can I help reduce Healthcare Associated Infections?

Infection control is important to the well-being of our patients and for that reason we have infection control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. We ask that you, and anyone visiting you, use the hand sanitiser available at the entrance to every ward before coming into and after leaving the ward. In some situations hands may need to be washed at the sink using soap and water rather than using the hand sanitiser. Staff will let you know if this is the case.

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If you require a translation of this leaflet please call the Antenatal Clinic
What is Group B Streptococcus (GBS)?
Group B Streptococcus (GBS) is a common bacterium which up to 1 in 4 women have in the vagina. Most women will be unaware of its presence and it is not necessary to take antibiotics to try to eradicate it.

Why does it matter?
Although GBS does not cause any problems for the woman, it is one of the more common causes of bacterial infection in newborn babies. Whilst many babies are exposed to the bacteria without becoming unwell, 1 in 1000 newborn babies may develop a GBS infection. In a unit the size of Buckinghamshire Healthcare NHS Trust, this means 5-6 babies a year.

Can infection of babies be prevented?
Most GBS infections in newborn babies can be prevented by giving you antibiotics into a vein in labour. The first dose should be given at least 2 hours before the birth of your baby.

Treatment in labour
It is recommended that you should be given intravenous antibiotics via a drip over a period of approximately 20 minutes if:

- a vaginal swab or urine sample has shown the presence of GBS at some point during pregnancy.
- you have had a baby previously infected with GBS.
- your waters have been broken for more than 18 hours during labour.
- you develop a high fever during labour.

This will usually be penicillin (or an alternative if you are allergic to penicillin).
Assessment and treatment of the baby at risk of infection

Babies born after 37 weeks:
If the antibiotics were given 2 hours or more before delivery:

- Your baby will be reviewed and, if well, no further treatment is necessary.

If the antibiotics were not given or were given less than 2 hours before the birth:

- You will be given an information sheet about how to check your baby for signs of later infection.
- Your baby will be assessed for signs of infection and have blood taken for his/her iron level and bacterial culture, which will show if there is infection in your baby's blood.
- Paediatricians will recommend that your baby be given intravenous antibiotics for up to 72 hours until the results of the cultures are available. These will stop if no infection is found. If GBS is present, the antibiotics will continue for at least 5 days and in some cases up to 10 days.

Babies born before 37 weeks:

- Paediatricians recommend that your baby receive intravenous antibiotics until culture results are available, which may be up to 72 hours. If GBS is present the antibiotics will continue for at least 5 days and in some cases up to 10 days.
- Side effects from short courses of antibiotics to newborn babies are very rare, eg occasional kidney and hearing impairment, but the drug level is closely monitored.
- You may need to stay in the hospital after the birth a little longer than you had planned—up to 5 days, or more, if your baby needs a full course of antibiotics.
What to look out for in your baby once you have returned home from hospital

At least 60% of GBS infections in babies are apparent at birth and around 90% are apparent within the baby’s first 12 hours of life, so most GBS infections are detected and treated before you and your baby go home. However, a small number (10%) of affected babies will still develop GBS after going home.

Signs you should be aware of are:

- Fever.
- Poor feeding and/or vomiting.
- Impaired consciousness—abnormally drowsy or withdrawn.
- Shrill or moaning cry or whimpering.
- Dislike of being handled, fretful.
- Tense or bulging fontanelle (soft spot on the head).
- Involuntary body stiffening or jerking movements.
- Floppy body.
- Blank, staring or trance-like expression.
- Altered breathing pattern/grunting.
- Pale and/or blotchy skin.

If your baby shows any of these signs, call your GP, community midwife or health visitor immediately. If you feel your baby is too unwell to wait for the arrival of one of the above, go straight to your nearest Accident and Emergency/Casualty Department.

Useful Contact Numbers

If you require translation of this leaflet, please contact either:

- Antenatal Clinic, Wycombe Hospital 01494 425575
- Antenatal Clinic, Stoke Mandeville 01296 316227
- Labour Ward, Stoke Mandeville 01296 316104

Reference