

Group B streptococcus in pregnancy

Maternity Services

Information for Patients

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Why have I been given this leaflet?

You have been given this leaflet because there is a higher chance your baby could get a Group B Streptococcus (GBS) infection.

This may be because:

- GBS was found in your urine or a swab
- You had GBS in an earlier pregnancy
- Certain things in labour raise the risk

The risk is higher if:

- Your baby is born early (premature)
- Your waters have been broken for more than 18 hours
- You have a high temperature during labour

If you have any of these risk factors you may be advised to have antibiotics in labour, even if you are not known to carry GBS. If you have had GBS before, you will be offered treatment in every pregnancy.

What is GBS?

GBS is a bacteria. It is carried by around 20% (1 in 5) of pregnant people in their intestines and on their skin. Carriers of GBS do not have any symptoms. This bacteria lives in our body all the time and normally causes no harm. It can be passed from person to person through direct physical contact. It is not a sexually transmitted disease. **We do not routinely test for this bacteria in pregnancy.**

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.
To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

What does this mean for my baby?

GBS can be passed on to your baby during labour (including once your waters have broken).

It can cause the baby to become ill. This is very rare.

We do not really know how or why this happens. We can lower the chance of the baby becoming ill by treating you with antibiotics during labour.

About 1 in 3 babies born to mothers carrying GBS will also carry GBS on their skin. A very small number (around 3 in 100) of these babies will become seriously ill. Rarely babies will die (around 1 in 10 of those who become ill with a GBS infection).

What if I go into labour or my waters break?

You will need to come to the Delivery Suite as soon as you think you are in labour or if you think your waters have broken.

Phone the Maternity Assessment Centre on Delivery Suite before coming in on:

Leicester Royal Infirmary: 0116 258 6111 select option 1

Leicester General Hospital: 0116 258 6111 select option 2

Once in hospital, you will be treated with antibiotics regularly during your labour. These will be given to you by a doctor or midwife through a tube in a vein in your arm.

If your waters have broken, but you are not yet in labour, you may be advised to have labour started (induced).

These antibiotics are very good at lowering the risk of infection to babies.

What if I do not have antibiotics in labour?

1. If you had the antibiotics at least 4 hours before you give birth:

- your baby will not usually need treatment.

If your baby is well and there are no more risk factors we will tell you what symptoms of GBS to watch for. You will be able to go home at the normal time.

2. If you have **not** had antibiotics at least 4 hours before the birth, or if you did not get them at all:

- The risk is still very low
- You may be asked to stay in hospital for 48 hours so that we can monitor your baby.
- Some babies may need antibiotics through a drip for at least 48 hours if they are at high risk of infection.

The paediatrician will talk to you about the risks to you and your baby. They will give you advice.

We advise you to give birth in hospital as you will not be able to have antibiotics at home in labour. If you want to give birth at home please discuss this with your midwife as soon as possible so we can make a plan.

What are the symptoms of a GBS infection?

In new-born babies there are 2 types of GBS infection: early and late onset.

Early onset infection

Early infection usually happens in the first 24 hours (up to 6 days).

Antibiotics during labour reduce the chance of this type of infection.

Symptoms may include the baby being:

- very hot or very cold (high or low temperature)
- not feeding well
- becoming unusually irritable very sleepy or not waking to feed
- not settling or making a noise when breathing out (grunting) noisy breathing or moaning
- blotchy skin

Late onset infection

The late onset infection usually happens between 6 days and 1 month of age. It affects 1 in every 2,700 babies, but rarely can happen up to 3 months of age. It often causes meningitis.

Antibiotics during labour do not reduce the chance of this type of GBS infection.

In half of the cases of late onset infection, the mother does not carry GBS. It is thought to be picked up by the baby from other close contacts.

Symptoms include:

- Irritable and high pitched whimpering cry, moaning
- Blank, staring into trance-like expression
- Floppy
- Tense or bulging soft spot in babies head
- Turning away from bright lights
- Stiff or jerking movements
- Pale and blotchy skin

Important

Get urgent help if your baby is unwell or shows any of these signs:

- Call 999 or go to A&E straight away
- Tell them you had GBS in pregnancy

Your baby may need treatment urgently.

What can I do to prevent my baby getting GBS?

There is a very small chance of late infection (up to 3 months old).

At home:

- You should look out for signs that your baby is not well.
- Washing your hands before you handle a baby is good practice for everyone, not just babies born to women who carry GBS.

More help and advice

It can sound worrying and complicated to hear that you and your baby have, or are at risk of having, GBS. Together we can help prevent any problems developing.

More information online:

- **Group B Streptococcus:**

Support: Tel 03301200796 (9am to 5pm Monday to Friday)

Email: info@bss.org.uk

Contact details

For questions about GBS or if you think you may be in labour, or your waters break:

- **Maternity Assessment Unit:**

0116 258 6111

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على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
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Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

Previous reference:

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net