

## Seminar 14: **Midwifery Practice and revised RCOG guidelines on Group B Streptococcus: insight from affected families**

Author: **Jane Plumb**, Chief Executive, Group B Strep Support

---

### **Context**

Group B Streptococcus (GBS) is the UK's most common cause of life-threatening infection in newborn babies. The RCOG recently revised its guidance on early onset GBS disease (EOGBS). We use survey data to explore the issues midwives may face in working within these new guidelines.

### **Methods**

An online survey (n=939) of parents and carers of babies affected by EOGBS. Participants were asked about awareness of GBS status in pregnancy and about whether IV antibiotics were administered in labour, and then about the clinical course of their baby's EOGBS infection, and about longer-term health, social and financial consequences of their baby's illness.

### **Results**

Most respondents (75%) were unaware at the time of labour that they were carrying GBS. The mothers of most babies who developed EOGBS (76%) were not given intravenous antibiotics in labour. 31% of respondents where GBS was detected during pregnancy were not given intravenous antibiotics in labour.

74% of babies with EOGBS were ill at or within 12 hours of birth. The most common presentations were sepsis (37%) and meningitis (18%).

### **Conclusions**

Antenatally, the new guidelines recommend providing a GBS information leaflet to all pregnant women. A greater awareness of GBS may result in more women wishing to discuss their options; midwives will need to have the knowledge to be able to do this.

Consistent with previous audit research, our results suggest that the RCOG guidelines are not always being followed correctly. The revised guidelines recommend offering intrapartum antibiotics based on a wider range of risk factors than previously, presenting a potentially greater challenge to midwives to work within these guidelines.

Postnatally, babies with EOGBS are likely to become unwell during their time under midwifery care. Midwives need to be especially vigilant for early signs of sepsis or meningitis, and to follow updated guidance on neonatal monitoring.