

## New survey launched into Group B streptococcus infection in babies

## April 2 2014

Researchers have launched a national study to see how common the potentially fatal bacterial infection Group B streptococcus is in UK and Irish babies.

Group B Streptococcus (GBS) is a <u>bacterium</u> that can cause serious infections. It is the most important cause of <u>invasive infections</u> in <u>newborn infants</u> and of <u>meningitis</u> in the first three months of life.

Experts at St George's, University of London, in collaboration with the British Paediatric Surveillance Unit and Public Health England will coordinate the study across UK and Ireland which will run for a 13-month period from April 1.

While most infected <u>babies</u> can be treated successfully and will make a full recovery, approximately 10% of babies with GBS disease will die and neurodisability occurs in up to 50% of survivors of GBS meningitis.

Antibiotics given intravenously to the mother during labour may prevent GBS disease in the first week; national guidelines introduced in 2003 and updated in 2012 currently recommend this for women with certain risk factors.

Currently there is no strategy to prevent disease which happens after the first week of life. A vaccine against GBS has been developed and is currently being tested in pregnant women.



The aim of the surveillance study, funded by a grant from the Meningitis Now charity, is to establish the number of cases of GBS in babies aged less than three months of age over a 13 month period.

Comparison with the last national surveillance for GBS, which was 13 years ago, will indicate whether current prevention strategies including the recently updated guidelines have had an impact on the number of cases.

Knowledge of the current situation will also be important for the implementation of a GBS vaccine programme.

Professor Paul Heath, who is leading the study, said: "GBS remains a major health burden. Since our last study 13 years ago around 8,000 babies are likely to have had this infection. Prevention is vital. A promising vaccine is on the horizon which makes this new study even more important."

Clinicians and microbiologists are asked to report cases from 1April 2014 onwards. Clinicians in the UK and Republic of Ireland will be asked to report cases via the BPSU orange card system. Microbiologists and laboratory staff will be requested to notify invasive GBS cases, and submit the isolates, to their national reference laboratory (e.g. PHE).

Clinicians in the Republic of Ireland will also report cases to the Health Protection Surveillance Centre (HPSC) as invasive GBS is a notifiable disease in Ireland. Clinicians in Northern Ireland will also report cases to the Public Health Agency.

Provided by St. George's University of London

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