

Guidance updated for managing infants at risk for group B strep

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(HealthDay)—Guidelines for the management and treatment of group B

streptococcal (GBS) disease in infants were published online July 8 in *Pediatrics*.

Karen M. Puopolo, M.D., Ph.D., from the Perelman School of Medicine at the University of Pennsylvania in Philadelphia, and colleagues developed recommendations for management of infants at risk for GBS disease and treatment of those with confirmed GBS infection.

According to the report, the American Academy of Pediatrics supports the American College of Obstetricians and Gynecologists-recommended maternal policies and procedures for prevention of perinatal GBS disease. Administration of intrapartum penicillin G, ampicillin, or cefazolin can provide adequate intrapartum [antibiotic prophylaxis](#) against neonatal early-onset GBS disease. For early-onset GBS disease, [risk assessment](#) should follow established principles, including separate consideration of infants born at ≥ 35 0/7 weeks and those born at ≤ 34 6/7 weeks, who are considered preterm and are at highest risk for GBS. Early-onset infection should be diagnosed by blood or cerebrospinal fluid culture; evaluation for late-onset disease should be based on clinical signs of disease. Antibiotic therapy differs by postnatal age at time of evaluation for both early- and late-onset GBS disease.

"We hope to identify more ways to prevent these infections, such as a vaccine that could be used worldwide," Puopolo said in a statement. "These guidelines are the most effective tool we have right now to protect infants and save lives."

More information: [Abstract/Full Text](#)

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