

Consensus Conference on “Strategies for GBS screening, prevention and treatment in the perinatal period”

Florence, Italy, June 6-8, 2013

*PREIS School (Permanent International and European School in Perinatal, Neonatal and
Reproductive Medicine, Florence*

OBJECTIVES OF THE MEETING

Group B Streptococcus is estimated to colonize 10% to 20% of pregnant women. Infection with GBS is considered an important public health issue, since it is associated with neonatal sepsis, death, chorioamnionitis, perinatal infection and preterm labour. The majority of infections are associated with intrapartum transmission of the microorganisms and therefore since a few years, several societies following the CDC recommendations have applied the strategy of GBS universal screening of pregnant women in the last month of pregnancy associated with the use of prophylactic antibiotics during labour. Although this strategy has led to a significant reduction in early onset neonatal GBS disease, there is, as a counterpart, an abuse of antibiotics during intrapartum, an increase risk of antimicrobial resistance and an increased number of unwanted side effects of antibiotics. Moreover, different sampling techniques and different culture methods for the GBS carriage in pregnant women may bring to an increase in the number of false positive and false negative results, taking also into consideration that the microbiological test performed far from labour does not accurately predict the GBS colonization of the genital tract, because GBS may be transient or intermittent and re-colonization can occur after the time of screening. Moreover, almost three quarters of full term infants with early onset disease is born to mothers screened antenatally and found culture-negative. Furthermore, some important societies like RCOG have recently published new guidelines which do not support anymore the prepartum screening. Therefore, actually there is a need to reach a consensus to try to overcome all these limitations and to homogenize the current practices and strategies in the European countries, in order to detect quickly and accurately the real GBS status at the time of labour, giving antibiotics only to whom really is worth.

ATTENDEES

Chairperson:

Gian Carlo Di Renzo - Italy

Panel of experts:

Alberto Berardi - Modena, Italy
Xavier Carbonell - Estrany - Barcelona, Spain
Gianpaolo Donzelli - Firenze, Italy
Najoua El Helali - Paris, France
Stellan Hakansson - Umea, Sweden
Rhona Hughes - Glasgow, UK
Mark Kurtser, Moscow, Russia
Pierrette Melin - Liège, Belgium
Claire Poyart - Paris, France
Eric Shinwell - Tel Aviv, Israel
Babill Stray-Pedersen - Oslo, Norway
Miroslav Wielgos - Warsaw, Poland
Moshe Hod - Tel Aviv, Israel

Representative of the European Association of Perinatal Medicine (EAPM)

Mats Blennow - Stockholm, Sweden

Representatives of the European Society of Pediatric Research (ESPR) and the European Society of Neonatology (ESN)