While it is thought that babies are most often infected with group B strep (GBS) as they pass through the birth canal, unfortunately, babies can also be infected by GBS before birth and up to several months of age.

**DURING PREGNANCY**

Studies have shown that group B strep is able to cross intact membranes reaching the baby in the womb (prenatal-onset).

- "GBS can cross intact amniotic membranes."¹
- "Universal screening and intrapartum antibiotic prophylaxis have had no measurable impact on late-onset GBS disease, prenatal-onset disease (including stillbirths and miscarriages), or GBS disease among nonpregnant adults...The burden of prenatal-onset GBS disease has not been assessed adequately, and no effective prevention tools have been identified before the intrapartum period."¹
- Seventeen studies reported GBS-related stillbirth rates varying from 0.04 to 0.9 per 1000 births, with the proportion of stillbirths associated with GBS ranging from 0 to 12.1%. Most studies reported data from before the year 2000 and from high-income countries.²

**AFTER BIRTH**

Once born, GBS disease can be caused by sources other than the mother (early or late-onset).

- Two distinct clinical syndromes of invasive GBS disease in the newborn exist... GBS late-onset disease presents between 7 days after birth and 2–3 months of age and is characterized by bacteremia, meningitis, or less commonly, organ or soft tissue infection. Late-onset disease is primarily acquired by horizontal transmission from the mother, but also can be acquired from hospital sources or from individuals in the community.³
- "Because of declines in early-onset GBS disease, the burden of late-onset disease is now similar to that of early-onset disease. More research on preventive measures against late-onset disease is needed."¹
REFERENCES

