

INTRAPARTUM ANTIBIOTIC PROPHYLAXIS



Aim -

95% of women in established preterm labour (less than 34 weeks gestation) to receive Intrapartum Antibiotic Prophylaxis at least 4 hours prior to birth.

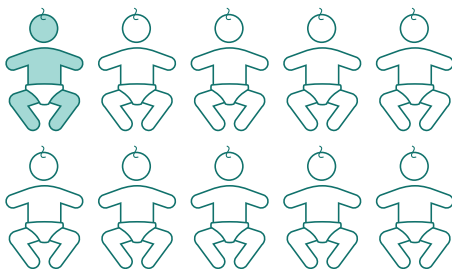
To prevent early onset neonatal Group B streptococcal (GBS) infection, women should receive intrapartum antibiotic prophylaxis **irrespective** of whether they have ruptured **or** intact membranes

In the UK we **don't currently screen** for GBS colonisation so in the case of PPRM and preterm labour we should practice cautiously and assume its presence

The risk of **death** from **GBS sepsis** in preterm infants is **25%**

Intrapartum antibiotics reduce the risk of neonatal **GBS sepsis** in GBS colonised women by **86%**

NNT 10 to prevent 1 infant being born preterm with GBS



Reduce the risk of abnormal neonatal **cranial ultrasound** findings by **20%**



Intrapartum antibiotic prophylaxis should be given at least 4 hours prior to birth. The antibiotics of choice are Benzylpenicillin or Cephalosporins/ Vancomycin in penicillin allergic women. Confirm agent with your local antimicrobial guidelines