INCIDENCE OF STREPTOCOCCAL INFECTIONS (DURING BOH, ANTENATAL AND PEURPURIUM)

by

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Introduction

Knowledge of the typical bacterial inhabitants of the cervix could be of value in assessing the pathogenesis of several clinical entities. Organism detected in the vagina may or may not be the same inhabitants of the cervix and vice versa. Potentially pathogenic bacteria may be found throughout pregnancy. Smith believes (Smith, 1960) that bacterial infection in premature infants is the result of maternal infection which probably begins by producing amnionitis in the mother, crosses the membrane, infects the fetus and probably results in a premature birth. Franciosi et al (1973) have discovered that group B haemolytic streptococcal disease of the new born could be suddenly lethal to the new born. A relationship of newborn sepsis from these organisms of positive cervical and vaginal cultures of group B streptococcus is established (Hood et al, 1961). In addition to trauma and tissue damage, the presence of pathogenic organisms is a

necessary condition for the development of post partum infection. Patient's own cervical and vaginal bacterial flora is an important source for these organisms. The present study based on the cervical and vaginal cultures from cases of bad obstetrical history, antenatal and puerperal sepsis.

Material and Methods

Three hundred cases were taken 100 from BOH, 100 from antenatal cases and 100 from puerperal sepsis. The age group of the patients were between 20-35 years. This study was from March, 1980 to March, 1982. The technic of obtaining the culture was that a sterile vaginal speculum exposed the cervix and a dry cotton swab was rotated within the cervical os. The swab was replaced in a sterile tube and most of these were delivered to the laboratory within one hour. The swabs were cultured on to sheep blood agar and MacConkey's plate and incubated at 37°C for 24 hours. The colonies were identified and the biochemical tests were put to identify the bacteria.

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Results

Out of these 300 cases, only 236 yielded

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TABLE I

| Cases examined | Positive | Positive for streptococci | Negative Postivity | | | |
|-------------------|------------------------|---------------------------|--|--|--|--|
| 100 | 80 | -5 | 20 | | | |
| 100 | 80 | _ | 20 | | | |
| 100 | 76 | 5 | 24 | | | |
| | examined 100 100 | 100 80 100 80 | examined streptococci 100 80 5 100 80 — | | | |

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| Organism | Cases screened | Cultures positive | Percentage |
|-------------------------|-------------------|-------------------|------------|
| E. Coli | | 74 | 25% |
| Staph, aureus | | 26 | 8.6% |
| E. coli + Staph. aureus | | 24 | 8.0% |
| Klebsiella | | 16 | 12.0% |
| Strepto. haemolyticus | | 10 | 3.3% |
| Lactobacilli | 300 | 4 | 1.2% |
| Proteus | | 8 | 2.6% |
| Rough staphylocoecus | | 10 | 3.3% |
| Sterile | | 64 | 21.3% |

the growth. Out of 236 cases, 10 had a streptococcus.

The main organisms were E. coli and Staphylo. aureus. Our incidence of B.haemolytic streptococcus was 3.3 per cent. There was no difference in BOH cases and puerperal sepsis, although the normal antenatal cases do not show any streptococcal infection.

Discussion

The fourteenth edition of Williams Text Book of Obstetrics (1971) cites a series of post-operative puerperal infections in which only 1.6 per cent were caused by B. haemolytic streptococcus. White and Koontz (1968) reported the incidence of 4.9 per cent in antenatal period of B. haemolytic streptococcus. Hood, et al (1961) reported the incidence of 5.8 per cent of B. haemolytic streptococci. They say that potential pathogenic bacteria may be present in the cervices of healthy pregnant women who go on to benign post partum courses. Jewett et al (1968) re-

ported an epidemic of puerperal fever caused by group A. B. haemolytic streptococci. Ledger and Heddington (1972) have recently reported 2 cases of post partum endometritis due to this organism. In both patients the infection was felt to be hospital acquired. As pointed by the case reports, B. haemolytic streptococcus can produce fatal post partum infections. S. aureus and E. coli were the organisms that caused most concern for the Boston group (Smith, 1960). For these reasons, we recommend consideration of routine examination in BOH cases and puerpurium, cervical culture and prophylactic therapy for B. haemolytic streptococci.

Summary

B. haemolytic streptococcus. Hood, et al (1961) reported the incidence of 5.8 per cent of B. haemolytic streptococci. They say that potential pathogenic bacteria may be present in the cervices of healthy pregnant women who go on to benign post partum courses. Jewett et al (1968) re-

staphylococci and lactobacilli.

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