

High Risk: Perinatal Infections

Most Common Perinatal Infections

- Toxoplasmosis
- Rubella
- Cytomegalovirus (CMV)
- Herpes Simplex Virus (HSV)
- Group B Strep

Toxoplasmosis

- Can get this from cats...mom should not clean the litter box.
- Protozoan that is spread by exposure. It poses some pretty serious risks to mom and fetus.
- Symptoms
 - Either non existent or vague flu-like symptoms
 - Many women don't know they have it b/c symptoms are so vague
- Bad things that can happen
 - Retinochoroiditis ? (look this up)
 - Convulsions
 - Coma
 - Microcephaly
 - Hydrocephalus
- Prevention
 - Stay away from cat poop
 - Keep the cat off the bed
 - Wash hands
 - Don't garden without gloves
 - Don't run around barefoot

Rubella (measles)

- Prevention = immunization
- Check titer as part of first labs when mom comes in for prenatal visit to see if she has been immunized
- Spread by droplets
- Symptoms in mother
 - Most likely just have a very mild rash
 - Probably won't feel too bad, maybe a little headache and itchy
- Fetal Risks: Rubella
 - Congenital cataracts
 - Sensorineural deafness
 - Congenital Heart Defects

Chlamydia

- Very common STD
- Spread by intimate contact and thru birth
- Symptoms in the mother
 - Virtually no symptoms!
 - Mom doesn't even know most of the time
 - Often seen concurrently with gonorrhea which is very symptomatic
 - Over half the population of patients with STDs have it.
- Fetal Risks of chlamydia
 - Neuro complications
 - Anemia
 - Hyperbilirubinemia
 - Thrombocytopenia
 - Hepatosplenomegaly
 - SGA
 - At risk for PNA

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- Breastfeeding safety is going to depend on mom being treated. I guess baby can't breastfeed safely unless mom gets treatment?
- Fetal demise is not uncommon :-)

Herpes

- Highly contagious and never goes away
- Spread by intimate contact and birth (via ascending infection as well...not sure what this means). If amniotic sac breaks, there is a < 4 hour window in which baby needs to be delivered. Women who have herpes are going to be tested throughout pregnancy and usually at 2 weeks to 1 month prior to delivery they'll get a thorough exam to check the status of lesions. May not be able to see all the lesions even with a vag exam. If woman has had active lesion in past month, they're going to go C/S route.
- Symptoms in the mother
 - Herpes lesions are very painful
 - The lesions can be in vaginal area or on mouth
 - First onset of herpes will usually have inguinal pain and enlarged lymph nodes
- Fetal Risks: Herpes
 - Preterm labor
 - Intrauterine growth restriction
 - Neonatal infection...these babies don't do very well.

Group B Strep

- This is an ascending infection
- When is the mother tested and how: tested during pregnancy
- Medications to treat the mother are given before she delivers
- Fetal Risks: GBS
 - Respiratory distress or pneumonia
 - Apnea
 - Shock
 - Meningitis
 - Long-term neuro complications
 - In nursery you may see: baby can't hold temp (early sign of a sick baby is an inability to hold temp), lungs sound a little gunky, color changes, irritable

Human Parvo-19 "slapped cheek disease", AKA "5th Disease"

- Causes a red rash
- Usually occurs in children, but can be transferred to adults where it is mild...not good news for fetus though
- How is it spread? It goes through the placenta in about 1/3 of the cases and has a fairly high fetal loss rate. May take 4-12 weeks post infection for the baby to die.
- When is it most detrimental to the developing fetus? She didn't say.
- Who is at risk? She didn't say. Maybe a pregnant woman who has school-age child? Don't know.
- Fetal Risks: Human B-19Parvo
 - Spontaneous abortion
 - Fetal hydrops
 - Stillbirth
- Diagnostic Testing
 - TORCH (an acronym for infections that are fetal toxic)
 - Toxoplasmosis, Other, Rubella, CMV, Hepatis/Herpes
 - Culture for chlamydia
 - Active lesions – could culture for HSV
 - Other lab tests (she didn't mention any specifically)

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Deglin, Judith Hopfer, and April Hazard Vallerand. *Davis's Drug Guide for Nurses, with Resource Kit CD-ROM (Davis's Drug Guide for Nurses)*. Philadelphia: F A Davis Co, 2009. Print.

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