

Alternative approaches to coping with Group B Strep (GBS)

Approximately a third of healthy pregnant women will test positive for Group B Strep during their pregnancy, a bacteria that can colonize the vagina and rectum. There is some concern of transmission of the bacterium to the baby during delivery, where the bacteria may cause meningitis, sepsis or pneumonia. If antibiotics are given, the risk to the baby is said to be 1 in 4000. If antibiotics are not given, the risk is shown to rise to 1 in 200. (Centers for Disease Control)

There are myriad approaches for Group B Strep in a pregnant woman, if prophylaxis is desired. Germicidal washes have been shown to be as effective as ampicillin (Chlorhexidine vaginal flushings versus systemic ampicillin in the prevention of vertical transmission of neonatal group B streptococcus, at term. J Matern Fetal Neonatal Med. 2002 Feb;11(2):84-8). Researchers have found this topical treatment has the same efficacy as ampicillin in preventing ascending transmission of GBS, and more effective at limiting E. coli. Women received 140 mL hexachlorophene (Hibicleanse) 0.2% by vaginal douche every 6 hours.

Also try to enhance the mother's immune system and reduce GBS colonization:

- 500-1000 mg Vitamin C with Bioflavonoids
- Cranberry capsules and garlic pearls 3X daily
- Acidophilus caps or plenty of live culture yogurt each day
- Bee proplis tincture
- Echinacea agustifolia, astragalus, and Usnea lichen
- Vaginal suppositories used for 2 weeks followed by 1 week of multiple strain acidophilus capsules vaginally (Recipe for suppositories found below).
- Peri-rinse after using the toilet

Other Strategies:

- Avoid rupture of membranes. Fetal infection is strongly linked to ruptured membranes – the longer the time period from rupture to birth, the greater the risk. Refrain from rupturing bag unnecessarily and encourage stronger membranes with adequate intake of Vitamin C (especially blueberries) in pregnancy.
- Preserve mucous plug – cervical mucous is strongly bactericidal and is particularly effective at destroying strep bacteria. If vaginal exams are performed routinely in pregnancy, they invariably carry bacteria from lower vagina to upper vagina and cervix. Exams done to assess dilation, or sweep membranes to encourage labor, may displace plug.
- Avoid cervical exams in pregnancy, labor and after rupture of membranes.

Vaginal Suppository Recipe

1 cup Echinacea agustifolia root, cut

1 cup Usnea lichen, cut

1 cup calendula flowers

Place these in a quart jar. Melt 8 oz. cocoa butter with 16 oz. coconut oil. Place over herbs. Heat-infuse by placing covered jar in a crockpot; add water to immerse the jar $\frac{3}{4}$ of the way. Set on low and cook 12-24 hours. Cool and strain. To 1 cup of the infused oil, add 1 Tablespoon of these powdered herbs: slippery elm bark, comfrey root, marshmallow root, and 20 drops of these essential herbs: lavender, rosemary, and tea tree. Chill slightly in an ice cube tray. When blocks are solid, cut them into quarters. Insert 1 small cube vaginally at bedtime for 2 weeks followed by 1 week of inserting multiple-strain acidophilus capsules.