

New PCR for the detection of GBS

Dorevitch Pathology now gives you faster time to results and increased sensitivity in the detection of Group B Streptococcus in genital specimens.

Group B *Streptococcus* or *Streptococcus agalactiae* (GBS) is the most common cause of severe infections in newborns. Maternal intrapartum GBS colonization is the primary risk factor for early-onset disease in infants. Pregnant women who are colonized with GBS in late pregnancy may be identified by screening genital specimens, traditionally by culture-based methods. Following receipt of the specimen, it may take up to 72 hours before a negative culture result can be released.

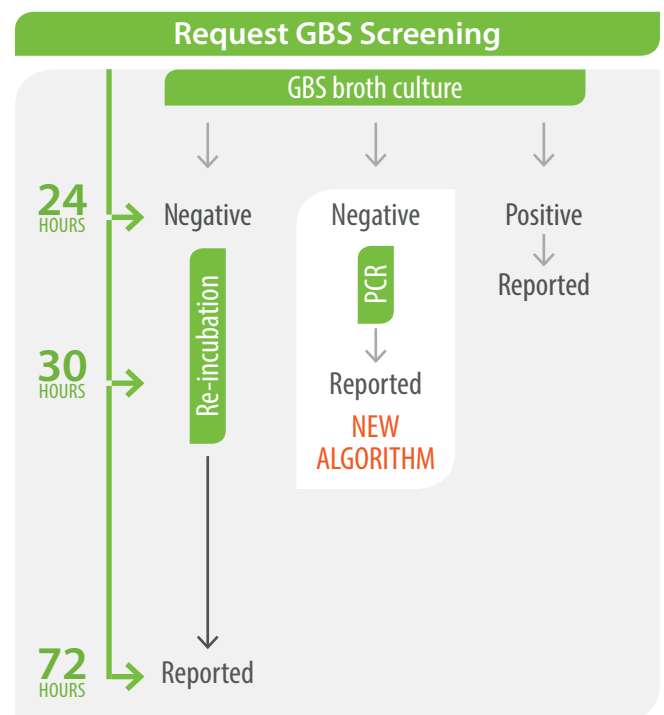
To reduce result turn-around-time, Dorevitch Pathology has introduced a real-time polymerase chain reaction (PCR) for the detection of GBS. It will be performed on specimens that are initially negative by enrichment broth culture. The expected time to result release is now less than 30 hours.

The new method shows increased sensitivity compared to broth culture. A validation study of the PCR assay was performed internally on 108 genital specimens from pregnant women who were being screened for GBS colonization. PCR identified an additional 9 GBS-positive specimens over broth culture.

The GBS PCR assay is now in routine use.

All specimens received for "GBS screening" as the indication stated on the request form will have broth culture performed; after overnight incubation positive culture results are reported and culture-negative specimens are tested by PCR (it is not required to specifically request GBS PCR).

Specimens with positive either GBS broth culture or PCR should be considered GBS-positive.



If there are any questions regarding this assay, please contact the Medical Microbiology team on 03 9244 0339.

Dr Sasha Jaksic (Head of Department) • Dr Jenny Wong • A/Prof John Spicer
Dr Kyra Chua • Dr Peter Kelley • Dr Roy Chean • Dr Sarah Garner • Dr Yvonne Hersusianto