GROUP B STREPTOCOCCUS (GBS), INVASIVE DISEASE
(Streptococcus agalactiae)
Last revised May 11, 2011

I. IDENTIFICATION
A. CLINICAL DESCRIPTION:
   A serious and sometimes life-threatening disease caused by the bacterium Streptococcus agalactiae (group B Streptococcus). Group B Streptococcus is a leading cause of meningitis and sepsis in neonates during their first week of life (“early-onset disease”). Invasive GBS disease can also occur a week to 3 months after birth (“late-onset disease”). The bacterium can also affect pregnant women, the elderly, and persons with immunocompromising conditions. It may produce bacteremia, meningitis, or focal infections, such as osteomyelitis, septic arthritis or cellulitis.

B. REPORTING CRITERIA: Laboratory confirmation.

C. LABORATORY CRITERIA FOR CONFIRMATION:
   • Isolation of group B Streptococcus (Streptococcus agalactiae) from a normally sterile site (e.g., cerebrospinal fluid [CSF], blood, joint, pleural, pericardial fluid or another normally sterile site). Isolation from urine, sputum, abscesses or pharyngeal swabs does not meet the case definition.

D. WISCONSIN CASE DEFINITION: A clinically compatible illness that is laboratory confirmed.

II. ACTIONS REQUIRED / PREVENTION MEASURES
A. WISCONSIN DISEASE SURVEILLANCE CATEGORY II:
   Report to the patient’s local health department either electronically through the Wisconsin Electronic Disease Surveillance System (WEDSS), by mail or fax using an Acute and Communicable Disease Case Report (F-44151), or by other means within 72 hours upon recognition of a case or suspected case.

B. EPIDEMIOLOGY REPORTS REQUIRED:
   • Electronically – Report through WEDSS, including appropriate disease-specific tabs or
   • Paper Copy – Acute and Communicable Diseases Case Report (F-44151)

C. PUBLIC HEALTH INTERVENTIONS:
   In accordance with Wisconsin Administrative rule DHS 145.05, local public health should follow the methods of control recommended in the current edition of Control of Communicable Diseases Manual, edited by David L. Heymann, published by the American Public Health Association.

III. CONTACTS FOR CONSULTATION

B. BCDER / COMMUNICABLE DISEASE EPIDEMIOLOGY SECTION: (608) 267-9003
C. WISCONSIN STATE LABORATORY OF HYGIENE / BACTERIOLOGY: (608) 263-3421

IV. RELATED REFERENCES
