Pregnancy and STDs Disease Information



Can pregnant women become infected with STDs?

Yes, women who are pregnant can become infected with the same sexually transmitted diseases (STDs) as women who are not pregnant. Pregnancy does not give women or their babies any protection against STDs. In fact, getting STDs while pregnant can be much more serious. It can be serious for both the woman and her baby. It can even be life threatening. It is important that women be aware of the harmful effects of STDs and know how to protect themselves and their children against infection.

How common are STDs in pregnant women in the United States?

Some STDs, such as genital herpes and bacterial vaginosis, are quite common in pregnant women in the United States. Other STDs, like HIV and syphilis, are much less common in pregnant women. The next table shows the estimated number of pregnant women in the United States who are infected with STDs each year.

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STD	Pregnant
Name	Women
Bacterial Vaginosis	800,000
Herpes Simplex	800,000
Chlamydia	200,000
Trichomoniasis	80,000
Gonorrhea	40,000
Hepatitis B	40,000
HIV/AIDS	8,000
Syphilis	8,000

How do STDs affect a pregnant woman and her baby?

STDs can have many of the same consequences for women who are pregnant as those who are not. STDs can cause cervical and other cancers, chronic hepatitis, PID (pelvic inflammatory disease), infertility and other complications. Many STDs in women are silent, without signs or symptoms.

A pregnant woman with an STD may begin labor early, rupture the membranes surrounding the baby in the uterus too early and get uterine infection after delivery.

STDs can be passed from a pregnant woman to the baby before, during or after the baby's birth. Some STDs (like syphilis) cross the placenta (the feeding connection between the baby and the mother) and infect the baby while it is in the uterus (womb). Other STDs (like gonorrhea, chlamydia, hepatitis B and genital herpes) can be passed from the mother to the baby during delivery as the baby passes through the birth canal. HIV (the virus that causes AIDS) can cross the placenta during pregnancy, infect the baby during the birth process and, unlike most other STDs, can infect the baby through breastfeeding.

The harmful effects of STDs in babies may include stillbirth (a baby that is born dead), low birth weight (less than five pounds), conjunctivitis (eye infection), pneumonia, neonatal sepsis (infection in the baby's blood stream), neurologic damage (such as brain damage or lack of coordination in body movements), blindness, deafness, acute hepatitis, meningitis, chronic liver disease and cirrhosis (scaring of the liver). Some of these problems can be prevented if the mother gets routine prenatal care. This should include screening tests for STDs starting early in pregnancy and repeated close to delivery, if necessary. Other problems can be treated if the infection is found at birth.

Should pregnant women be tested for STDs?

STDs affect women of every social, economic and educational level and every age, race, ethnicity and religion. The CDC 2002 Guidelines for Treatment of Sexually Transmitted Diseases recommend that pregnant women be screened on their first pre-natal visit for the following STDs:

- Chlamydia
- Gonorrhea
- · Hepatitis B
- Hepatitis C
- HIV
- Syphilis

In addition, some experts recommend that women who have had a premature delivery in the past be tested and treated for bacterial vaginosis at the first prenatal visit. Pregnant women should request these tests because some doctors do not always perform them. Newer and more accurate tests are becoming available. Even if a woman has been tested in the past, she should be tested again when she becomes pregnant.

Can STDs be treated during pregnancy?

Bacterial STDs (like chlamydia, gonorrhea and syphilis) can be treated and cured with antibiotics during pregnancy. There is no cure for viral

STDs, such as genital herpes and HIV, but antiviral medication for herpes and HIV may reduce symptoms in the pregnant woman. For women who have active genital herpes lesions at the time of delivery, a cesarean delivery (C-section) may be performed to protect the newborn against infection. C-section is also an option for some HIV-infected women.

How can pregnant women protect themselves against infection?

The surest way to avoid infection with any sexually transmitted disease is to practice sexual abstinence (abstain from any sexual contact) while single. If you marry, select a partner who is not infected with an STD and remain sexually faithful during marriage.

Condoms do not provide complete protection from STDs. Infection can occur in both males and females whether or not a condom is used.

A recent review by the Centers for Disease Control and Prevention (CDC) determined that there is no clinical proof that condoms are effective in reducing the risk of infection from chlamydia, genital herpes, HPV, syphilis, chancroid or trichomoniasis. Some protection was found for men against gonorrhea infection, but not for women. Condoms were found to reduce the risk of HIV/AIDs transmission during vaginal sex by 85% when used correctly and consistently (following the directions exactly and using them at every occurrence of sex).¹ Condoms still leave a 15% risk of HIV infection. HIV is the virus that causes AIDS, a routinely fatal disease.

Sources and Resources

1. Centers for Disease Control and Prevention, National Center for HIV, STD and TB Prevention, Divisions of HIV/AIDS Prevention, Workshop Summary: Scientific Evidence on Condom Effectiveness for Sexually Transmitted Disease (STD) Prevention June 12-13, 2000, found at: http://www.niaid.nih.gov/ dmid/stds/condomreport.pdf, accessed 1-5-04 (a review of 138 scientific studies concerning condom effectiveness published July 20, 2001.)

Centers for Disease Control and Prevention, National Center for HIV, STD and TB Prevention Division of Sexually Transmitted Diseases, STDs and Pregnancy Fact Sheet, reviewed December 2003, technical update January 9, 2004. found at: http://www.cdc.gov/std/STDFact-STDs&Pregnancy.htm, accessed 1-5-04, using the following sources:

Centers for Disease Control and Prevention, Sexually transmitted diseases treatment guidelines 2002, MMWR 2002;51(no. RR-6).

Goldenberg RL, Andrews WW, Yuan, AC, MacKay HT, St. Louis ME. 1997. Sexually transmitted diseases and adverse outcomes of pregnancy. In: Clinics in Perinatology: Infections in Perinatology 24(1): 23-41.

Institute of Medicine, 1997, The Hidden Epidemic: Confronting Sexually Transmitted Diseases, Eng TR, Butler WT, eds. Washington: National Academy Press.



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