

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 provide women or their babies any protection against STDs. The consequences of an STD can be significantly more serious, even life threatening, for a woman and her baby if the woman becomes infected with an STD while pregnant. 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, notably HIV and syphilis, are much less common in pregnant women. The table below shows the estimated number of pregnant women in the United States who are infected with specific STDs each year.

STDs	Estimated Number of Pregnant Women
<u>Bacterial vaginosis</u>	1,080,000
<u>Herpes simplex virus 2</u>	880,000
<u>Chlamydia</u>	100,000
<u>Trichomoniasis</u>	124,000
<u>Gonorrhea</u>	13,200
<u>Hepatitis B</u>	16,000
<u>HIV</u>	6,400
<u>Syphilis</u>	<1 ,000

How do STDs affect a pregnant woman and her baby?

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

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 and infect the baby while it is in the uterus (womb). Other STDs (like gonorrhea, chlamydia, hepatitis B, and genital

herpes) can be transmitted from the mother to the baby during delivery as the baby passes through the birth canal. HIV can cross the placenta during pregnancy, infect the baby during the birth process, and unlike most other STDs, can infect the baby through breastfeeding.

A pregnant woman with an STD may also have early onset of labor, premature rupture of the membranes surrounding the baby in the uterus, and uterine infection after delivery.

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, blindness, deafness, acute hepatitis, meningitis, chronic liver disease, and cirrhosis. Most of these problems can be prevented if the mother receives routine prenatal care, which includes 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?

Yes, STDs affect women of every socioeconomic and educational level, age, race, ethnicity, and religion. The CDC 2006 Guidelines for Treatment of Sexually Transmitted Diseases recommend that pregnant women be screened on their first prenatal visit for STDs which may include:

- [Chlamydia](#)
- [Gonorrhea](#)
- [Hepatitis B](#)
- [HIV](#)
- [Syphilis](#)

In addition, some experts recommend that women who have had a premature delivery in the past be screened and treated for bacterial vaginosis at the first prenatal visit.

Pregnant women should ask their doctors about getting tested for these STDs, since some doctors do not routinely perform these tests. New and increasingly accurate tests continue to become 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?

Chlamydia, gonorrhea, syphilis, trichomoniasis, and bacterial vaginosis (BV) 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 may be appropriate for pregnant women with herpes and definitely is for those with HIV. 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. Women who test negative for hepatitis B, may receive the hepatitis B vaccine during pregnancy.

How can pregnant women protect themselves against infection?

The surest way to avoid transmission of sexually transmitted diseases is to abstain from sexual contact, or to be in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected.

Latex condoms, when used consistently and correctly, are highly effective in preventing transmission of HIV, the virus that causes AIDS. Latex condoms, when used consistently and correctly, can reduce the risk of transmission of gonorrhea, chlamydia, and trichomoniasis. Correct and consistent use of latex condoms can reduce the risk of genital herpes, syphilis, and chancroid only when the infected area or site of potential exposure is protected by the condom. Correct and consistent use of latex condoms may reduce the risk for genital human papillomavirus (HPV) and associated diseases (e.g. warts and cervical cancer).

Where can I get more information?

Division of STD Prevention (DSTDP)
Centers for Disease Control and Prevention
www.cdc.gov/std

[Order Publications Online](#)

CDC-INFO
1-800-CDC-INFO (800-232-4636)
TTY: 1-888-232-6348
In English, en Español

National Herpes Hotline
(919) 361-8488

[National Herpes Resource Center](#)
herpesnet@ashastd.org

Resources:

[CDC National Prevention Information Network \(NPIN\)](#)

P.O. Box 6003
Rockville, MD 20849-6003
1-800-458-5231
1-888-282-7681 Fax
1-800-243-7012 TTY
E-mail: info@cdcnpin.org

[American Social Health Association \(ASHA\)](#)

P. O. Box 13827
Research Triangle Park, NC 27709-3827
1-800-783-9877

Sources

[Centers for Disease Control and Prevention. Sexually Transmitted Diseases Treatment Guidelines 2006.](#) MMWR 2006;55(no. RR-11).

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