Antenatal screening

In Northern Ireland all pregnant women are offered a screening blood test to check for hepatitis B, HIV, and syphilis infection and for rubella virus (German measles) susceptibility.

The blood test is part of the booking bloods offered at the women's first antenatal appointment. The vast majority of women screened will not be infected, or be susceptible to the rubella virus, but for the very small number of those who are, the benefits of screening are substantial.

The diagnosis, treatment and management offered to mothers or vaccination given, once the baby is born, means the health of the mother can be much improved and the chances of the baby being infected can be greatly reduced.

The antenatal infection screening programme is a complex programme, involving a wide range of professionals working in maternity units and laboratories through to regional hepatology, genito-urinary medicine, neonatal and paediatric services. All have to work closely together. The Public Health Agency and partner organisations are responsible for ensuring that pregnant women have access to safe, effective, high quality and equitable screening programmes.

The screening programme performs to nationally agreed, and DHSSPSNI, endorsed screening standards.

Key resources:

- Screening tests for you and your baby | HSC Public Health Agency
- Protecting you and your baby: Screening tests for infectious diseases in pregnancy | HSC Public Health Agency
- Hepatitis B: what your positive screening result means (English and translations) | HSC Public Health Agency
- Syphilis: what your positive screening result means (English and translations) | HSC Public Health Agency
- Antenatal infectious disease screening | nidirect

Screening for Group B Streptococcus (also called GBS or Strep B)

Group B Streptococcus (also called GBS or Strep B) is a bacterium carried by up to 30 per cent of people without causing harm or symptoms. In women it is found in the intestine and vagina and causes no problem in most pregnancies. In a very small number it infects the baby, usually just before or during labour, and can lead to serious illness.

Treatment for GBS
In some circumstances antibiotics can reduce the risk of a baby developing GBS. You should be offered antibiotics during labour if:

- You have previously had a baby with invasive GBS infection
- GBS has been found in your urine in your current pregnancy
- GBS has been found on swabs from your vagina which have been taken for another reason during this pregnancy
- You have a high temperature during labour
- If you have an infection of the membranes around the baby (Chorioamnionitis)

Your obstetrician or midwife will assess whether you need to be given antibiotics during labour. If you need antibiotics, they will be given through a vein (intravenously).

Screening for GBS
In Northern Ireland, as in the rest of the UK, routine testing for GBS in pregnancy is not currently recommended because there is insufficient evidence to support it. This position is kept under regular review.

If you are concerned about GBS, discuss it with your doctor or midwife.

More useful links

- Group B Strep Support website
- nidirect – Group B Streptococcus and pregnancy
- PI GroupB streptococcus (GBS) infection in newborn babies.pdf

Share this page

- Share by email
- Share on X
- Share on Facebook

- Share on LinkedIn
- Share on WhatsApp
- Download as PDF

Was this page useful?

Yes No

Thank you for your feedback.

Sorry to hear that. Tell us what went wrong.

Last reviewed
19 June 2026