

Germs in the form of viruses and bacteria are around us all the time. Some, which are harmless most of the time, can pose a threat to women who are pregnant or planning to conceive. Over the next few pages, we look at the infections you really need to know about.

Chicken Pox (varicella zoster)

Whoever would have thought that chicken pox would be a problem! Most people think of chicken pox as an unpleasant childhood illness which causes itchy spots that turn to scabs. Sadly though, chicken pox is far from harmless. While some children can get complications, pregnant women are very much at risk. If caught in the early weeks of pregnancy when the embryo is still forming the virus can cause a range of abnormalities. After the fourth month of pregnancy, the damage from the virus lessens, although if women catch it around the time that they give birth, complications can occur.

German measles (rubella)

German measles or rubella is quite a rare infection nowadays because most girls have already been vaccinated. Symptoms include a rash that starts on the face and spreads down to the chest, arms and legs. In itself, the infection is not serious, but if caught in early pregnancy the effects on the baby may be very serious and are known as the 'rubella syndrome'. The earlier on in pregnancy that the infection is contracted, the more severe the effects. These can include blindness and deafness in the baby, as well as possible miscarriage.

Slapped Cheek syndrome (erythrovirus type B19)

This is one that you may not have heard of, but is quite common in children. The infection gives children a red rash on their cheek – hence its name. It can sometimes be a problem in pregnancy, although fortunately it is quite rare. Its effects include miscarriage and stillbirth and some fetal deformities.

Essential steps

- 1 Find out whether or not you have already had chicken pox as a child. If so you should have some antibodies that will protect you. If you have not had chicken pox, your doctor may check your immunity and offer you a vaccination.
- 2 Avoid contact with children and adults who have either chicken pox or its cousin shingles. If you work with children, make sure that you tell your doctor before you become pregnant.
- 3 Once you are pregnant, if you have contact with someone who has the infection, make an appointment to see your doctor immediately.

Essential steps

- 1 Find out if you have been vaccinated against this disease. If you are not completely sure, it is essential to have your immunity checked by your doctor before you get pregnant. A simple blood test will confirm whether or not you are immune. A vaccination will then be offered.
- 2 If you are not rubella immune and are pregnant, contact your doctor if you think that you have come into contact with the disease. You may for example have been travelling abroad.

Essential steps

- 1 If possible, avoid being in contact with children with this infection.
- 2 If you know that you have been in contact with the disease, make an immediate appointment to see your family doctor.

CHILDHOOD INFECTIONS – NOT QUITE AS THEY SEEM

You may not have children or have regular contact with them, but childhood illnesses often do the rounds and so, even at a supermarket, you may be exposed to some common childhood illnesses.

Some common childhood infections are a bit like Jekyll and Hyde. On the surface they appear perfectly harmless, causing at the most some irritating symptoms, but catch them in pregnancy and the effects can be devastating. Knowing about the infections can help you to avoid them or take steps to prevent catching them.

Fact file ... Toxoplasmosis

Behind this big word is a tiny parasite that can do quite a bit of harm in pregnancy. We turn the spotlight on to

understanding how this parasite goes about its business and how you can avoid catching it.

What is it?

Toxoplasmosis is a tiny parasite that is found in meat, cat's mess and also in soil where cats may have dirtied.

How can it be caught?

The parasite is usually taken in by swallowing something that has been infected with the parasite. It can be caught by humans as well as other animals and birds.

Why does it matter?

Most healthy people who get toxoplasmosis will probably never

know it. The most usual symptom is a flu-like illness, although occasionally strong reactions can occur. Sadly in pregnancy, the effects of toxoplasmosis can be more severe and affect the unborn baby. In the first twelve weeks of pregnancy toxoplasmosis is at its most dangerous and can cause miscarriage or damage to the baby's brain and other organs. If caught later in pregnancy, it can still cause damage particularly to the baby's eyes.

IF YOU GET A FLU-LIKE ILLNESS IN PREGNANCY, CONTACT YOUR DOCTOR

Treatment for toxoplasmosis
Ideally, you should try to avoid contracting toxoplasmosis by following the steps in the chart below.

If you feel that you are at risk or have flu-like symptoms, you should see a doctor immediately. A blood test will be carried out to assess whether or not you are already immune or have a current infection. Once the results of the test are back (which can take up to three

weeks) your doctor will talk through what action if any needs taking. Happily, the effects of acute toxoplasmosis in pregnancy are quite rare as many women with an active infection do not pass it onto the unborn baby.

Practical steps to avoid toxoplasmosis

There are many practical ways in which you can avoid getting toxoplasmosis. Many of them will also prevent you from getting other diseases.

Fruit and vegetables

- Wash your hands before preparing food.
- Wash all fruit and vegetables thoroughly.
- Wash chopping boards, knives and utensils after preparing the fruit and vegetables.

Meat

- Wash hands before and after touching raw meat.
- Wash chopping boards, knives and other utensils immediately after raw meat has touched them.
- Eat only meat that has been thoroughly cooked through.
- Avoid raw fish.
- Avoid raw cured meats such as parma ham.

Outdoors

- Wear gloves when gardening. Wash hands afterwards.
- Cover children's sand boxes to prevent cats using them as litter trays.
- Wash hands before eating even before having a picnic or eating an ice cream. Avoid contact with sheep and newborn lambs.

Cats and other animals

- Wear gloves when changing litter trays or better still ask someone else to do it.
- Wash hands after touching animals.
- Check that your cat is in good health.
- Avoid contact with sheep and newborn lambs for example, don't visit a farm in spring time.



Most people have never heard of toxoplasmosis. Diana Brocklebank Scott was typical of many women. In February 2001 she was diagnosed as having acute toxoplasmosis and later lost her unborn baby.

'Before becoming pregnant, I had read a number of general leaflets about pre-pregnancy care but most focused on general diet. I had been given no advice about how to avoid getting toxoplasmosis. Soon after being diagnosed with it, I realised that information about the condition, and

specifically awareness of its prevention, was lacking. 2001 was a difficult year for my husband, Anthony, and me; we lost our baby because of an infection that is preventable. Toxoplasmosis is detectable by a simple blood test, just like rubella. A healthy person who has had it carries the antibodies and is immune to further infection. Women who are immune protect their unborn children. However, women who are not immune can take simple precautions to avoid catching it.'

'We resolved to help Tommy's, the baby charity, to raise money to provide better information on toxoplasmosis. We wanted to target this information at those who are considering starting a family and to the wider public. Anthony and four of our friends, Alan Kasket, Stuart Grant, Ivo Clifton and Jenny Robins, formed 'Team Toxo' and ran the gruelling 26.2 miles of the 2002 London Marathon, raising £63,836 for Tommy's.'

SEXUALLY TRANSMITTED INFECTIONS –

could it be you?

Sexually transmitted infections are back and very much on the increase. They can be the reason behind infertility and miscarriage, although many have few if any symptoms. Our special report looks at what is out there and whether you could be at risk.

In the UK the days when men and women were virgins on their wedding night are long gone. These days most women and men spend some time enjoying sexual freedom before settling down. While few people want to go back to the chaste old days, it is a fact of life that sexually transmitted infections (STIs) are on the increase, as Maria Simpson explains. 'While most people are aware of the HIV/AIDS message, we have seen a huge increase in other STIs over the past few years. Most worrying is perhaps chlamydia which is now the commonest bacterial infection.'

'Chlamydia is easily treatable if caught early on'

Health professionals say chlamydia is a huge concern because of its ability to leave women infertile without them necessarily having any symptoms. Maria explains, 'Chlamydia has been on the increase and although some women may get some vaginal discharge, many others will not.

It is a progressive disease and if it reaches the fallopian tubes can cause scarring and infertility. The good news, however, is that it is easily treatable with antibiotics if caught early on. Our advice to women is always to come in regularly and get screened particularly if they have had a recent change of partner or know that at one time in their lives they may have been at risk.'

'They may have moved on emotionally, but the STI stays around'

When it comes to who may be at risk, it can be anyone who has had several sexual relationships and not always used condoms.' STIs are a fact of life rather than a stigma. We see men and women from every walk of life. Sometimes they realise that they have picked up an infection from a previous partner's partner. The message to couples is to use condoms until they are completely sure that neither they nor their partner has been at risk in the past. It's easy for couples to forget past behaviour and relationships once they are committed to a relationship. Sadly, while they may have moved on emotionally, the STI stays around.' Maria reminds couples that if their relationship is stable and they are thinking of starting a family, it might be a good time to talk honestly about their previous histories. 'We have had women whose partners have had one night stands in the past and the first time that they find out there is any problem is when they can't conceive.'

'Being screened for infection can be a good idea'

So when and where should you go for help? Maria suggests it can be a good idea to have a health check up before trying for a baby, if women know that they or their partner may at some time have been at risk. She explains that the best place to go is the health centre or professional clinic where you feel comfortable. She also emphasises that all information is confidential and screening for specific infections only takes place with consent.



SEEK HELP IF YOU:

- Have pain during or after sex
- Notice a change in vaginal discharge
- Have pain or feel stinging when urinating
- Spot blood in between your periods
- Have any blisters on genitals
- Begin to have heavy periods

What's out there?

This table shows

Name	Female symptoms	Male symptoms	Treatment
Chlamydia	Vaginal discharge. Pain or burning sensation when passing urine. Not all women have symptoms.	Unusual discharge, soreness or other symptoms. Can lead to lower sperm count, lower sperm motility and more abnormal sperm.	Early treatment with antibiotics.
Gonorrhoea	Vaginal discharge. Pain or burning sensation when passing urine. Painful abdomen.	Unusual discharge. Pain or burning sensation when passing urine. Irritation of the penis. Redness at the opening of the urethra at the end of the penis.	Early treatment with antibiotics.
Herpes	Painful blisters on genitals. Pain when urinating.	Painful blisters on genitals.	Ointment. Do not have oral sex with anyone who has cold sores.
Hepatitis B	Some or all of the following: flu-like symptoms (cough, sore throat), tiredness, mild fever, muscle and joint aches, loss of appetite, nausea, vomiting.	Some or all of the following: flu-like symptoms (cough, sore throat), tiredness, mild fever, muscle and joint aches, loss of appetite, nausea, vomiting.	No treatment, but rest and good food can aid recovery after a few months. Vaccine available for people who are at risk of catching it e.g. travellers, health workers.
HIV	No symptoms for many years but can develop into AIDS which is life-threatening.	No symptoms for many years but can develop into AIDS which is life-threatening. A new technique, where semen is 'washed', can allow HIV-positive men to father healthy children without increasing the risk of infecting an HIV-negative partner.	No cure, but treatments available. Health workers and people who travel in some other countries should take preventative measures. Women with known infection can be helped to have a safe pregnancy and birth.

1 Were you sexually active or did you have several partners between the ages of 16-24?

2 Have you or your partner had unprotected sex on a one-night stand or on a holiday?

3 Have you had a recent change of partner?

4 Have you or your partner had anal sex without a condom?

5 Have you or your partner ever had a sexually transmitted infection?

6 Have you or your partner ever used needles to take drugs?

7 Have you been in a relationship with a partner who has travelled abroad?

Could you be at risk?

It is easy to want to forget past behaviour that may have been risky, but look at these questions with your partner to assess whether either of you might be at risk.

8 Do you have any concerns that your partner has been unfaithful at any time in your relationship?

If you can answer yes to one or more of these questions, it might be worth getting yourself checked out as a precautionary measure. Make an appointment either with your practice nurse, GP, family planning or genital urinary clinic. Go where you feel most comfortable.

9 Have either of you had more than four sexual partners in your lives?

10 Have you ever had bleeding between periods?

11 Have you had pain or a burning sensation in passing urine?

12 Have you ever had painful sexual intercourse?

13 Do you have very heavy periods?

14 Have you ever had oral sex while you or your partner has had a cold sore on the mouth?

15 Do you use sex toys anally and vaginally?