Listeria Monocytogenes Infection in Pregnancy : Rare but devastating.

S Innayat, S Ratnaparkhi, E Damigos
Darlington Memorial Hospital

NHS County Durham and Darlington NHS Foundation Trust

OBJECTIVE

Presenting case report of uncommon disease in pregnancy.

CASE REPORT

34 years old, G2P1, BMI 33, presented at 28+3 weeks gestation with generally feeling unwell, flu like symptoms and threatened preterm labour. On admission, she was pyrexial and tachycardiac. Midwife was unable to auscultate foetal heart, intrauterine foetal death was on scan by consultant. At delivery ,thick meconium was noted. Blood cultures and placental swabs confirmed Listeria Monocytogenes infection. Patient was commenced on intravenous Amoxicillin 2g QDS for 14 days after discussion with microbiologist .

DISCUSSION

Listeria monocytogenes is a commonly found organism in processed and prepared food. It can be vertically transmitted to foetus resulting miscarriage, preterm birth, sepsis ,stillbirth and congenital neonatal infections. Pregnant women are at ~18times greater risk of infection than general population due to specific pregnancy-related suppressed cell-mediated immunity. Maternal infection with Listeria presents as flu like symptoms but could lead to chorioamnionitis & meconium-like amniotic fluid during delivery.. Once infection is suspected or confirmed the first- choice antibiotics are intravenous ampicillin or amoxicillin with Gentamicin. A combination of intravenous trimethoprim and sulfamethoxazole is recommended if patient is allergic to Penicillin.

CONCLUSION

The incidence of listerosis in pregnancy is 12 /100,000. Maternal illness in listeriosis is usually mild compared with fetal illness, which can be serious .Food safety and education are vital in preventing this disease as lack of knowledge and information on which foods to avoid and care with certain food plays major role .In patients who are exposed or who are symptomatic , screening can be done for presence of listerolysin -O antibodies, which may help in preventing and minimising the risk of complications .Fetal & maternal morbidity is preventable by early treatment with antibiotic

REFERENCES :

1.An update review of Listeria infection in pregnancy : Z wang, X Tao , S Liu, Y Zhao , Infection and drug Resistance May 2021
2. Listeriosis during pregnancy. Madjunkov M, Chaudhry S, Ito S. Arch Gynecol Obstet. 2017
3. Management of Pregnant women with Presumptive exposure to Listeria : ACOG
4 . Listerosis i pregnancy : Diagnosis ,Treatment and prevention ,V Janakiraman ,Obstet Gynecol.2008 fall :
5. Listeriosis in pregnancy: An umbrella review of maternal exposure, treatment and neonatal complications:I Founti Khsim, A MAnton,I Horte.R Lamont,K Khan, C Prieto. BJOG December 202