

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on ocular prophylaxis for gonococcal ophthalmia neonatorum. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from September 11, 2018 to October 9, 2018. The Task Force welcomes your comments.

Ocular Prophylaxis for Gonococcal Ophthalmia Neonatorum

The Task Force issued a **draft recommendation statement** on *Ocular Prophylaxis for Gonococcal Ophthalmia Neonatorum*.

The Task Force recommends applying an antibiotic ointment to the baby's eyes at birth, known as ocular

prophylaxis, for preventing gonococcal ophthalmia neonatorum (GON). This antibiotic ointment is required in most states and is standard of care for all newborns.

What is gonococcal ophthalmia neonatorum (GON)?

GON is a severe infection of the eye that can occur in babies born to women with gonorrhea. The bacteria that caused gonorrhea in the mother can be passed to the newborn during delivery and lead to GON. If left untreated, GON can cause serious eye problems, such as blindness.

Facts about Gonococcal Ophthalmia Neonatorum and Ocular Prophylaxis

GON is a severe infection of the eye that can occur in babies born to women with gonorrhea.

During birth, the baby's eyes can become infected with the gonorrhea bacteria. If left untreated, GON can cause serious eye problems, such as damage to the eye and blindness. These problems can occur as early as 24 hours after birth.

Ocular prophylaxis means applying an antibiotic ointment to the baby's eyes at birth to prevent GON. The only antibiotic approved by the FDA for this purpose is erythromycin. In the U.S., the antibiotic ointment is standard care for all newborns. As a result, GON is extremely rare.

Potential Benefits and Harms of Ocular Prophylaxis to Prevent Gonococcal Ophthalmia Neonatorum

The Task Force looked at evidence on ocular prophylaxis for newborn babies to prevent GON.

The Task Force found that the antibiotic ointment is safe for babies and very effective at preventing GON. Without this preventive medicine, it is estimated that up to 50% of babies born to mothers with gonorrhea could develop GON.

The Task Force found that ocular prophylaxis does not cause serious harms to the babies.

The Draft Recommendation on Ocular Prophylaxis for Gonococcal Ophthalmia Neonatorum (GON): What Does It Mean?

Here is the Task Force's draft recommendation on ocular prophylaxis for gonococcal ophthalmia neonatorum. It is based on the quality and strength of the evidence about the potential benefits and harms of interventions for this purpose. It is also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues a **Grade A**, it recommends preventive treatment because it has more potential benefits than harms. .

Before you send comments to the Task Force, you may want to read the **draft recommendation statement**. The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An **evidence document** provides more detail about the scientific studies the Task Force reviewed.

The USPSTF recommends *prophylactic ocular topical medication* for all newborns for the prevention of *gonococcal ophthalmia neonatorum*. **(A Recommendation)**

Notes

prophylactic ocular topical medication
Applying medicine to the eye to prevent an eye infection

gonococcal ophthalmia neonatorum
A severe infection of the eye that can occur in babies born to women with gonorrhea.

What is the U.S. Preventive Services Task Force?




The Task Force is an independent, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a **draft recommendation statement**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the [Task Force Web site](#).

USPSTF Recommendation Grades

Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

Click Here to Learn More about Gonococcal Ophthalmia Neonatorum

-  **Conjunctivitis (Pink Eye) in Newborns**
(Centers for Disease Control and Prevention)
-  **Neonatal Conjunctivitis**
(MedlinePlus)
-  **Gonorrhea**
(Womenshealth.gov)

Click Here to Comment on the Draft Recommendation



The Task Force welcomes comments on this draft recommendation.



Comments must be received between September 11, 2018 and October 9, 2018.



All comments will be considered for use in writing final recommendations.