Ophthalmia Neonatorum

Agent: *Chlamydia trachomatis* (bacteria) or *Neisseria gonorrhoeae* (bacteria). *C. trachomatis* is more common.
Mode of Transmission: Infants are typically exposed to the organism in the birth canal during childbirth. Rarely, infection during cesarean delivery or in utero may occur.
Signs/Symptoms: Redness or swelling of one or both eyes beginning five to fourteen days after birth.
Prevention: All pregnant women should be screened for chlamydia and gonorrhea. Women who were infected with *C. trachomatis* or *N. gonorrhoeae* in the first trimester of pregnancy should be retested during the third trimester to prevent postnatal infection in the infant. Topical prophylactic agents applied to newborns' eyes are highly effective at preventing development of gonorrhea ophthalmia, but do not always effectively prevent chlamydia ophthalmia.

Ophthalmia Neonatorum: 2015 Data Summary	
Number of Cases:	4
5-Year Average Number of Cases:	7.2
% Change from 5-Year Average:	-44%
Incidence Rate per 100,000:	0.0

In 2015, four infants were reported with ophthalmia neonatorum in Virginia. All four were caused by *C. trachomatis*. Since 2006, 74 cases of ophthalmia neonatorum have been reported in Virginia; eight were caused by *N. gonorrhoeae*, and 66 by *C. trachomatis.*