SUMMARY AND CONCLUSIONS

A pregnant woman who develops listeriosis may have a low grade septicaemia that appears clinically as an influenza like illness in the later stages of pregnancy *(Gray and Killinger, 1966).*

Listeriosis is common and implicated in about 3% of second-term abortions. Maternal fever was followed rapidly in all instances by the expulsion of a non macerated fetus. Chorioamnionitis was always present and was associated with placental microabscesses *(Lallemand et at, 1992).*

Other pathogens that cause septicaemia during pregnancy are the group B streptococci which have documented an intrapartum maternal genital tract to infant as a mode of transmission among neonates with onset of illness in the first kw days of life *(Baker et al, 1975)* and E.coli (K_1) is a major cause of neonatal sepsis. Colonization of the infant during or after birth by E.coli is very common *(Canchi et at, 1984).*

The most common organisms causing neonatal septicemia are Escherichia coli and group B streptococci (which together account for 50-75% of cases at most medical centers), Haemophilus influenza, staphylococcus aureus, klebsiella, pseudomonas, proteus and listeria monocytogenes *(Behrman and Vaughan, 1992).*

The present work can be looked to be a trial which faced a good success. Although the incidence of Listeriosis is low, in recent years the prevalence of this illness appears to be increasing.