

Infection Control

Information for patients in the community with MRSA

This leaflet is designed for both patients and the public; it is about MRSA and answers some common questions.

What is MRSA?

MRSA stands for Methicillin-Resistant *Staphylococcus Aureus* (*S. aureus*).

Staphylococcus aureus (*S. aureus*) is a common germ/bug (bacteria), that 3 in 10 of us carry naturally. There are other types of bacteria in the *Staphylococcus* family, and we all carry at least one of the types on our skin at times, or throughout our lives. *Staphylococci*, as a group, are the most common cause of wound and skin infections. Some people carry *S. aureus* in their noses and on their skin. This is normal and does not require treatment. However some patients in hospital, who have MRSA on their skin, do sometimes require treatment.

MRSA is a particular type of *S. aureus* that has developed resistance to methicillin, a type of penicillin, as well as many other types of antibiotics. 'Resistance' means that it is not killed by the antibiotic. Similar infections occur whether a type a *S. aureus* is resistant to antibiotics or not. Most of the time MRSA just sits on the skin without causing a problem but if it enters the body through an open wound for example it may cause an infection.

Who is vulnerable?

The following make patients vulnerable to **any** infections:

- their underlying condition
- the number of operations they've had
- the presence of open wounds
- how frequently they've used antibiotics. This is much less likely to cause a problem in the community where patients are not given several different antibiotics so often or for such a long time.

Is MRSA a superbug?

MRSA is sometimes referred to in the media as a superbug. However, a full explanation of MRSA is seldom given and the consequences are often exaggerated. Many people carry MRSA on their skin and lead full and normal lives.

What is the difference between colonisation and infection with MRSA?

MRSA colonisation means that the bacteria is simply “sitting on the skin” (in any site) but is causing no harm to the person.

In an **MRSA infection**, the bacteria are causing signs of infection, for example, fever and/or pus discharging from a wound. If you suffer from any of these, headaches or diarrhoea, they may **not** be due to MRSA. You should contact your General Practitioner (GP) as you would normally do if you feel unwell.

Is MRSA a problem in the community?

MRSA is not a problem to fit, healthy people, children or pregnant women. However, people staying in hospital, receiving treatment and undergoing investigations are more at risk. People who have long-term skin lesions (such as leg ulcers), long-term urinary catheters and those receiving frequent courses of antibiotics are also more at risk.

If you are discharged home from hospital before the results of MRSA swabs are available, your GP will also be informed. Generally there are no special precautions that you will need to follow.

Will I be tested at home for MRSA?

You will be notified if your doctors consider it useful to take further swabs but generally it is not necessary. It might be useful to know if you still have the MRSA, for example: if you have further surgery planned.

Will you treat my MRSA?

It is generally not necessary to treat patients who are colonized with MRSA (carriers) in the community. The only exception would be if further treatment was planned, such as a planned operation.

Can I pass MRSA on to my friends and relatives?

If you have MRSA, you are not a risk to your healthy relatives or friends. You can continue to live a normal life and maintain your usual relationship with your partner. Good hygiene and cleaning procedures in your household are enough to lower the risk of possible spread.

If you have open wounds, these should be covered with a clean dressing and changed as frequently as required. Normal hygiene precautions are sufficient as long as you wash your hands afterwards. If you injure yourself or have to deal with someone else who has an injury, you should wash your hands afterwards. No other special precautions are necessary.

Will MRSA stop me doing any normal daily activities when I return home?

MRSA is not a cause for concern in the community. If you feel well enough, it is important that you continue your usual activities including swimming, socialising and shopping. If you work with children or the elderly in official care settings speak to your doctor or the Community Infection Control Team for advice.

If I have MRSA, can I use the physiotherapy, rehabilitation or day care facilities?

If it is required, people who have MRSA are able to use the rehabilitation and physiotherapy facilities.

Will having MRSA stop me having further treatment, including operations?

If you require surgery in the future, it is helpful to check if your MRSA is still present. Swabs can be taken by either your GP's practice nurse or in a hospital clinic.

The presence of **any** infection can delay planned surgery for example: if you have an "ordinary" chest infection. Having an MRSA infection is no different. Skin treatments for patients colonised with MRSA can be started before the surgery and antibiotic "cover" treatment can be given when needed.

If I have MRSA, can I go into residential care or a nursing home with other residents?

Providing you are clinically fit, the presence of MRSA will not delay discharge to either your home, residential or nursing home.

Will my pets catch MRSA from me?

It is extremely rare for animals to be affected by MRSA.

Will MRSA affect my work and study?

In most circumstances, having MRSA should not affect your ability to attend work or college. However, if you are working in a health-care setting, we recommend you seek

further advice. For most other people, observing normal hygiene is sufficient and there is no need to tell employers or colleagues. If you are concerned, ask your GP or the Infection Control Nurse for advice.

If I become pregnant, is my baby at risk of MRSA and am I more likely to get infections during birth?

If you are pregnant, there are no additional risks from MRSA and this is similar for other infectious agents. If you are concerned, ask your doctor or midwife for advice.

Who needs to know I have MRSA?

Only staff involved in your health need to know that you have MRSA, including district nurses, your GP and nursing and medical staff, who are caring for you during your hospital visits or stays.

If you have had MRSA in the past, it would be helpful to tell doctors and nurses (both in the community and in hospital) because it might assist in planning your care.

Who has responsibility for MRSA at Addenbrooke's Hospital?

The Chief Executive of the Trust has overall responsibility for MRSA in Addenbrooke's Hospital. The Infection Control Team takes care of the day-to-day issues.

Are staff screened for MRSA?

It is rarely necessary to screen staff for MRSA. The Infection Control Team will decide when and which staff are screened.

What is being done to stop the MRSA problem?

The overuse of antibiotics worldwide has led to the emergence of many antibiotic-resistant bacteria, one of which is MRSA. The Department of Health has produced guidance to GPs and the public to discourage the use of antibiotics, unless they are clinically needed. Hospitals are also addressing this issue by adhering to local antibiotic policies and following national guidance.

We all are monitoring cleaning standards in hospitals, surgeries and other care facilities closely to ensure they are up to standard. We are also encouraging everyone to work together to decrease the risks of catching **all** types of infection, not just MRSA. The simplest way to do this is to **wash your hands frequently and follow good hygiene precautions.**

Further Information:

For further information about MRSA contact:

- your GP
- or the Infection Control Nurses Telephone: 01223 217497 (or hospital extension 3497).
- Alternatively you can contact NHS Direct on 0845 4647
- Royal College of Nursing: www.rcn.org.uk/resources/mrsa

Please ask if you require this information in other languages, large print or audio format: 01223 216032 or patient.information@addenbrookes.nhs.uk

Potete chiedere di ottenere queste informazioni in altre lingue, in stampato grande o in audiocassetta.

Italian

若你需要本信息的繁體中文、大字體或音訊格式的版本，請要求索取。

Cantonese

તમને આ માહિતી બીજી ભાષાઓમાં, મોટા અક્ષરોમાં અથવા સાંભળી શકાય એવા માધ્યમ (ઓડીઓ ફોર્મેટ)માં જોઈતી હોય તો કૃપા કરીને પૂછો.

Gujarati

تکایہ پرسیار بکے نہ گھر نہ وزانیاریہت دہوی بہ زمانیکی تر , بہ بیٹی گہورہ یانیش بہ شیوہی دہنگ

Kurdish

آگر آپ کو یہ معلومات دوسری زبانوں میں، بڑے الفاظ کی اشاعت میں یا آڈیو ٹیپ پر درکار ہوں تو براۓ مہربانی اس کیلئے درخواست کریں۔

Urdu



Addenbrooke's is smoke-free. Please do not smoke anywhere on the site.

For advice on quitting, contact your GP or the NHS smoking helpline free, 0800 169 0 169

Document History

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