MRSA

wash it away
As a patient it is important that you get better quickly and stay well. This leaflet gives you information about MRSA and other health care associated infections, so that you know what they are and what you can do to help stop yourself acquiring one, whilst in hospital, a care home or when you return home.

This booklet can be produced in alternative formats and other languages on request. Please telephone 023 9282 2444 or email portsmouthcity.pct@ports.nhs.uk
What is MRSA?

MRSA has recently received a lot of attention and the media often refer to it as the ‘hospital superbug’. MRSA stands for Meticillin Resistant Staphylococcus Aureus. MRSA is part of the Staphylococcus Aureus (SA) bacteria family.

*Staphylococcus aureus* (SA) is a type of bacteria (germ) that can live harmlessly on human skin, but can sometimes cause a number of common infections. It is found in the nose of 20-40 per cent of healthy people and in skin creases. It does not cause a problem unless it gets into a skin break during surgery or when you accidentally cut yourself, when it can cause a simple infection, such as a boil, or enter your blood stream. If it enters pores, it can also cause boils or an infection. It is sensitive to, and will be killed by, most commonly used antibiotics.

However, MRSA is a particular type of SA which has developed resistance to most antibiotics. It can live harmlessly on the skin and in some chronic wounds such as leg ulcers, but can cause problems if it does get into a skin break such as a surgical wound or a normally sterile body cavity, such as your bladder. MRSA is difficult to treat because there are only a few antibiotics that will kill it.
How can you get MRSA?
It is a myth to think of MRSA just as a ‘hospital superbug’. It can be caught and passed on almost anywhere. MRSA can be passed from person to person by contact between them. Someone carrying the germ on their hands or skin can pass it on to another person if good basic hygiene is not carried out. It can also be found in the environment or on equipment used by people carrying the germ if cleanliness standards are not maintained. People can carry MRSA without knowing it, so you may have acquired it before your admission.

Is MRSA dangerous?
MRSA usually affects elderly people and those with certain long-term health problems and generally does not harm healthy people, including pregnant women, children and babies. It is important to remember that MRSA is not only found in hospitals and care homes. People living in the community can also carry the germ. If you have an infection that needs treating your doctor will decide the best, most appropriate treatment. In rare cases MRSA can be fatal. In such cases the person probably acquired MRSA when they were already very ill, their immune system was low and their body was unable to cope with this additional problem.

What you can do to help stop the spread of MRSA and other infections
When you are admitted to hospital or other places of care, for example a nursing home, you are exchanging the familiar surroundings of your own home to share a ward or home with other people. You may be more vulnerable because of your illness, medication or surgery. By its very nature a hospital, or other place of care, exposes you to other people’s germs.
You can help yourself and other patients by -

> always washing and drying your hands after visiting the toilet and before you eat

> not touching or fiddling with your wound or any device that is in your arm/leg/bladder or other body cavity – for example a drip or catheter

> not exposing your wound to show your visitors
> keeping the space around you tidy and uncluttered, this will make the cleaning of dust easier for you or a member of staff/helper. Your visitors or relatives could help you to do this

> telling your nurse, the matron, clinical leader or helper if you spot any dirt or dust on the ward or at home

> washing and drying your hands before and after helping other patients

> showering as frequently as you are able

> reminding staff about hand washing and drying if they forget (they may use alcohol hand rub nearby as this efficiently cleans hands as an alternative) – don’t worry they won’t be offended

> asking your visitors to wash and dry their hands thoroughly before and after entering the ward/home and not to sit on your bed or use the patients’ toilets

> not sharing possessions or equipment with other patients unless it has been cleaned

> asking your relatives and friends not to visit in large groups.

If you are worried or unsure about any infection control issues ask your nurse to explain or ask to speak to a member of the infection control team.
What happens if I get MRSA?
You may be moved to a side or single room (if one is available or your condition requires this.) Don’t worry, this is a way of treating you more effectively and protecting other patients. Your nurse will explain to you and your relatives about what will happen and why there is a need to move you.

If you are colonised (just carrying MRSA without it causing infection) you will probably be prescribed a special body wash, shampoo and cream for your nose, which is a way of trying to remove and reduce the MRSA from the places where it may live. As you get better the MRSA may simply clear up. However, if you have signs of infection, the microbiologist and your doctor will discuss the best medication for you.

Please ask about your condition and its treatment. This way you can fully understand what needs to be done and how you can help with your treatment. If you don’t understand something, always ask again.

Can my visitors get MRSA?
If visitors carry out simple basic precautions such as hand washing and drying before entering, and after leaving, the place where you are or when helping to take care of you, they will, to a large extent, protect themselves from becoming colonised with MRSA. If visitors do acquire the bacteria, it will usually cause them no harm, they will probably be unaware of it and it will be temporary and won’t need to be investigated or treated. It is important to remember that a large number of us already carry sensitive staphylococcus aureus and are protected by our own bacteria.
What can I do at home to stop the spread of MRSA?
Being discharged home from hospital or a care home is an important step on the road to recovery. You and your family may be worried about being at home in view of the strict measures that may have been practised while you were in hospital. These measures were aimed at controlling and reducing the spread of all germs, not just MRSA, to other vulnerable patients who are at risk because of their illness or surgery. At home these risks are reduced but it is important that you continue to follow good personal hygiene rules, (whether you have MRSA or not!) Wash and dry your hands -
> after going to the toilet and blowing your nose
> before and after dealing with a wound
> before and after assisting with personal care for any other member of your family
> after you do household tasks such as cleaning
> before eating or drinking.

If unfortunately, you have to be re-admitted to hospital or another place of care – please tell your nurse if you were MRSA positive when you were last an inpatient.
Frequently Asked Questions

*How did the doctor find out that I have MRSA?*
The doctor or nurse would have taken a swab from your nose, groin, wound or body fluids such as urine. These would have been sent to the laboratory for analysis and the results sent back to your doctor. The results would tell the doctor if the bacteria had been found and what antibiotics might be suitable for getting rid of it.

*If I am a resident in a nursing/rest home will they move me to a different bedroom if I have MRSA?*
This will depend on where the MRSA has been found as the bacteria can spread in different ways. For example if it was in your saliva and you were coughing then you might be moved to prevent spread of the bacteria. However if it was in a wound or leg ulcer which could be covered then there would be no need to move you.

*If I have MRSA in my leg ulcer/wound can I mix with other people, for example at my local surgery or shopping centre?*
Having MRSA in a leg ulcer or wound will not prevent you from mixing with other people when it can be covered with a dressing. If the wound or ulcer is leaking speak to your nurse so a more absorbent dressing can be used.

*I have MRSA in my urine. Will my family catch it if they use the same toilet?*
This is very unlikely. Routine hand hygiene and cleaning of the toilet will prevent any spread of infection.

*I have heard that skin is shed as we sleep. Will this mean that I cannot share a bed with my partner if one of us has MRSA?*
Skin is shed all the time however the risk to another bed partner is minimal. A problem may arise if your partner has breaks to their skin. This could provide a site of entry for the bacteria, which could then cause them an infection.
Are there any special laundry requirements?
Routine laundering is all that is required when you are in your own home.

If my home help or friend is changing my bed linen for me, will they need to take special precautions?
All they need to do is wash their hands after handling the bed linen.

If I am at home and my skin sheds onto the carpet or equipment is there any special cleaning I need to undertake?
Routine cleaning is all that is required, this will reduce the build up of any dust, which is important as MRSA like to live in dust.

If I react to the products suggested to treat MRSA, what should I do?
There are alternatives available so speak with your nurse or doctor for more information.

Who will help me with the skincare programme used to remove the MRSA?
Whoever routinely helps you with your daily washing can help. However your nurse will help you organise this as it will be dependent on your specific circumstances.
If I am being treated by my practice nurse at the surgery, could I catch MRSA from the treatment room if the last patient seen had MRSA?
This is possible however the equipment is cleaned between each patient use and the nurse washes his/her hands between patients therefore reducing the risk of any cross infection significantly.
**How will I know when the MRSA is gone?**

Most MRSA that sits on the skin will be removed through routine washing and laundering. Ironing and tumble drying your clothes is also recommended to ensure removal of MRSA.

If you had MRSA when you were in hospital it is likely to go once you are at home by routine daily washing.

If you have a wound or ulcer once it is healed the MRSA is likely to go. You will not be screened routinely to check if the MRSA is no longer on your skin or wounds. This will only be done if you are due to return to hospital for investigations.
Other contacts
Health Protection Agency
www.hpa.org.uk

Your GP for further advice and information

NHS Direct 0845 46 47

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