

MRSA

MRSA

MRSA

Methicillin resistant
Staphylococcus aureus

what you need to know



Llywodraeth Cynulliad Cymru
Welsh Assembly Government

MRSA is not a new problem – the strains first appeared in the early 1960's. In some countries where antibiotics are available much more freely than here, the spread of MRSA has been accepted as more or less inevitable. In the UK there has been and continues to be, a focus on prevention and control.

This leaflet aims to answer some of the more frequently asked questions about MRSA.

What is MRSA and what can it do?

Staphylococcus aureus is a bacterium (germ) that is commonly found on the skin or in the noses of many healthy people without causing harm, this is known as colonisation. However it can sometimes cause abscesses, boils and wound infections, and less frequently more serious infections such as septicaemia (blood poisoning), particularly in those who are already unwell.

These infections can usually be effectively treated by commonly prescribed antibiotics. However, some strains of Staphylococcus aureus are resistant to an antibiotic called methicillin and some of the antibiotics that are usually used to treat infection. They are referred to as methicillin-resistant Staphylococcus aureus (MRSA). MRSA is unlikely to present a problem to a healthy person.

How do you know when someone has MRSA?

The only way staff (medical/nursing) can find out if someone has MRSA is to send a swab or other sample e.g. urine, to a hospital laboratory for examination. The medical/nursing staff will then advise the patient of the results of the test.

Many people who get MRSA have no symptoms at all, this is known as “colonisation”. The germ is causing them no harm but it can still be spread to more susceptible individuals, particularly in a hospital environment.

Why is MRSA important in hospital?

Patients in hospital can be susceptible to infection because of their illness and/or treatment. If a patient gets an infection caused by MRSA it may be more difficult to treat as the germ is resistant to many, but not all, antibiotics.

This is why hospital staff take infection control measures to prevent the spread of infections including MRSA, in hospitals.

How do you get MRSA?

MRSA may be on someone’s skin or in their nose before they go into hospital or they may acquire it during their stay in hospital. The germ can spread from one person to another, most often by hand contact.

This is why good hand hygiene is so important in helping to prevent the germ spreading!

Can MRSA be treated?

Once MRSA has been found in one place on the body, staff will usually take more samples to see if it is present elsewhere on the body.

If treatment is necessary, it will vary depending on whether or not the patient is colonised or has an infection. If needed, treatment prescribed for colonisation may consist of ointment to put up the nose, and an antiseptic skin cleanser/hairwash. In addition the doctor may prescribe antibiotics if MRSA is causing an infection.

Each course of treatment usually takes five to seven days. Once the treatment regime is completed, samples/swabs may be taken again to see if the treatment has been successful in eradicating the infection. These samples will not usually be taken for at least 48 hours after completion of a course of treatment. The treatment may need to be repeated. Even if it has been successful it is possible that MRSA can recur when someone is vulnerable or has been on antibiotics.

What will happen if a patient in hospital is found to have MRSA?

If they stay in hospital they may be moved to a single room (this makes it easier to prevent the germ being spread to other patients).

Will they be allowed to leave their accommodation?

Normally patients with MRSA are requested to remain within the accommodation provided. On occasions when they have to leave, nursing staff will advise on any precautionary measures to be carried out to reduce the risk of spreading MRSA to others within the hospital. Nursing staff will also advise on the possibility of relatives/carers taking patients with MRSA out into the grounds of the hospital.

Can patients with MRSA have visitors whilst in hospital?

They can have visitors as usual. However, young babies and those who are immunocompromised (people who are more susceptible to infection because of diseases such as cancer, or open wounds, or medication such as steroids) are discouraged from visiting.

Patients or visitors who have any concerns should feel free to discuss them with the nursing or medical staff, or a member of the Infection Control Team.

It is not generally necessary for visitors to wear plastic aprons or gloves. Hospital staff wear these items in addition to washing their hands as part of infection control measures to prevent spread of the germ. However, if visitors are assisting with personal care, it may be prudent for them to wear gloves and aprons. The nursing staff on the ward will be happy to advise.

All visitors will be advised to wash their hands after visiting.

Can MRSA hurt me?

MRSA will not usually harm healthy people. Concerns about MRSA harming family and friends should be discussed with nursing/medical staff.

Will MRSA delay discharge from hospital?

If a patient is medically fit they may be discharged home or back to a nursing or residential home. Treatment can be completed following discharge.

Will the hospital tell the GP/Nursing Home and Community Nurse about the MRSA?

When a patient leaves hospital, staff will write and if necessary telephone the GP or Nursing Home informing them of the test results and what treatment has already been given or is required to treat the infection. They will also be advised of when, or if any further, swabs/samples need to be repeated.

What special precautions need to be taken in the home?

Not all the precautions taken in hospital are necessary at home. If someone in his or her own home has contracted MRSA or a patient is discharged home with MRSA, it is advisable to follow basic hygiene measures including:

- washing hands thoroughly and regularly throughout the day;
- keeping a bath towel and flannel for personal use;
- towels, flannels, underwear and bed linen should be changed regularly and laundered using as hot a wash cycle as is compatible with the fabric.

There is no need to segregate crockery and cutlery. They can be washed in detergent and hot water or in a dishwasher as usual.

Will Community Nursing/GP staff take special precautions?

If they are providing personal care they too, like hospital staff, will wear gloves and aprons, as they will be attending to other patients. They will always wash their hands or use a disinfecting hand rub before leaving the home.

Do people with MRSA need to stay indoors until the germ has gone?

No – they should lead a normal life doing everything they did before acquiring the germ.

What should happen if someone with MRSA is admitted/re-admitted to hospital?

Either the patient, a relative or carer should tell the hospital staff (medical/nursing) that they have, or have had, MRSA in the past.

Because MRSA can come back, even after treatment appears to have been successful, certain precautions are necessary. Swabs may need to be taken again and a single room may be necessary until negative sample results are obtained.

It is helpful if the Accident & Emergency department/Admissions Office are informed before a bed is allocated to you in the ward. If a GP is arranging the admission it may be helpful to remind him/her about the history of MRSA.

NB. This refers to any hospital and not just the hospital where the MRSA was identified.

Any further concerns or questions should be discussed with the hospital nursing/medical staff, the Infection Control Team, community nursing staff or GP, or public health (communicable disease) staff as appropriate.

ISBN 0 7504 3053 2

© Crown Copyright

Produced by the Welsh Assembly Government

November 2002

The text of this document may be reproduced without formal permission or charge for personal or in-house use.

First published: November 2002

If you require further copies of this publication, contact:

Public Health Protection Division 2
Office of the Chief Medical Officer
Welsh Assembly Government
Cathays Park
Cardiff CF10 3NQ
Tel 029 2082 5410