

MRSA



Information for patients and visitors

This leaflet explains how we test for, treat and prevent infections with a bacterium (germ) called MRSA (meticillin-resistant *Staphylococcus aureus*). If you have any questions or concerns, please do not hesitate to speak to the doctors or nurses caring for you.

What is MRSA?

MRSA stands for meticillin-resistant *Staphylococcus aureus*.

Staphylococcus aureus (*S. aureus*) is a bacterium (germ) commonly found on the skin and often causes no harm.

Meticillin is an antibiotic used to treat infections caused by *S. aureus*. When *S. aureus* becomes resistant to meticillin and a range of other antibiotics (the antibiotic no longer works against the bacterium) it is called meticillin-resistant *Staphylococcus aureus* or MRSA. This **does not** mean that someone who has an infection caused by MRSA cannot be treated, just that they will have to be given different antibiotics to the ones usually used.

About one in three of us permanently carry *S. aureus* bacteria in our nose or on the surface of our skin (especially in folds like the armpit or groin) without being aware of it or getting an infection. This is completely normal and is known as being **colonised** by the bacteria. Another one third of people will carry *S. aureus* from time to time.

In the same way, people can carry MRSA in their nose or on their skin without them being aware of it or having any symptoms. Far fewer people are colonised with MRSA - it lives harmlessly on the skin of about 1 in 30. People who have recently been in hospital or are admitted frequently are more likely to carry MRSA.

When does MRSA become harmful?

Most of the time MRSA does not cause any problems and people who are colonised with the bacteria do not look or feel different from anyone else.



But you can sometimes get an infection caused by *S. aureus*, including MRSA. This usually happens when the germ gets into your body through a break in your skin and cause a wound or skin infection. Occasionally, it can cause more serious infections. For example, it may get into your bloodstream and cause septicaemia (blood poisoning).

Who is most at risk of an MRSA infection?

MRSA does not normally infect healthy people, even if they are colonised. Although it is possible for people outside hospital to become infected, MRSA infections are most common in those who are already in hospital. This is because:

- patients often have a way for the bacteria to get into their body, such as through a surgical wound, a catheter or a drip into a vein
- they tend to be older, sicker and weaker than the general population, and often have a weakened immune system, which makes them more likely to get an infection
- they are surrounded by a large number of other patients and staff, so MRSA can spread more easily on the hands of staff and patient equipment.

How is MRSA spread?

You can pick up MRSA at home or in hospital. You may become colonised or develop an infection.

It can be spread:

- from person to person by touching someone who is colonised or infected
- by touching or sharing towels or sheets with someone who is colonised or infected
- by touching room surfaces or objects that have MRSA on them.



How do I know if I have MRSA?

Almost all NHS patients admitted to hospital are now tested (screened) for MRSA. This helps us to reduce the chance of patients getting an MRSA infection or passing MRSA on to another patient.

The test involves using swabs – cotton buds – to take samples from areas such as your throat, the inside of your nose, your perineum (the skin between your anus and your vagina/scrotum) or your groin, and from any wounds/ breaks in your skin, drip into your vein or catheter sites.

- If you are coming in for a planned (elective) procedure, you will be screened before by your GP (home doctor) or a pre-admission nurse.
- If you come in as an emergency, we will screen you when you are admitted.

How is MRSA treated?

If your screening swab results come back as MRSA positive, you will be informed by either the Preadmission Nurse or your GP, or if in hospital, by your Nurse or Doctor on the ward looking after you.

If you are colonised with MRSA

We may prescribe you a course of treatment that involves using a skin wash lotion as well as an ointment that you put inside your nose. After using them as prescribed, you will stop for two days. You may be tested for MRSA again three days after the end of the course of skin treatment. It may take several days to get the results of this test.

If it shows you still have MRSA on your skin, you will have to repeat the course of skin treatment. If you are discharged from hospital before the end of the skin treatment, we will give you a bottle of



antiseptic wash and a tube of nasal ointment so you can finish at home.

How to use the skin wash lotion

The pink-coloured antiseptic skin wash lotion comes in a bottle and must be used as prescribed. You should use it as a liquid soap/shampoo for a shower, bath or wash every day for 5 days. Avoid getting it in your eyes or ears.

1. Wet your skin.
2. Put the skin wash on a clean, damp flannel and use it to thoroughly clean your whole body, working downwards.
3. Make sure you wash your skin for at least one minute, in particular your face, nose, armpits and groin.
4. Rinse off with clean water.
5. Next, wash your hair with the lotion.
6. Rinse off with clean water.
7. Wash your hair on day one and five.

- Do not share the bottle with anyone else.
- Do not use it with other shampoos, soaps or moisturisers.
- Ask us for a new bottle if you run out.

How to use the ointment

The antibiotic nose ointment comes in a small tube. You need to use it three times a day.

1. Squeeze a small amount of the ointment on to a clean finger.
2. Put the ointment on the insides of both of your nostrils.
3. Using clean fingers, gently press both nostrils together for a few seconds to thoroughly spread the ointment over the inside of your nose.



If you have an MRSA infection

We will ask you to follow the same course of antiseptic skin wash and nose ointment treatment as patients who are colonised with MRSA. We will also prescribe you antibiotics.

What happens if I am colonised or infected with MRSA?

If you are colonised or have an MRSA infection, everyone looking after you will wear gloves and an apron to prevent the spread of the bacterium, in addition to hand hygiene. We may also move you to a side room, off the main ward.

It will not affect your care in any way, for example, if you need investigations or a procedure.

Do visitors need to take any special precautions?

Your family and friends are welcome to visit you. To prevent the spread of MRSA to other patients or elsewhere in the hospital, visitors in addition to staff must always wash their hands using soap and water or alcohol hand rub before going into or leaving the ward or your room/

Visitors do not need to wear gloves or aprons unless they are helping with your care, such as with your personal hygiene.

What happens when I leave hospital?

Having MRSA will not prevent or delay you from leaving hospital, so as soon as you are well enough you will be discharged. It should not affect your home life, including your usual daily activities.

Do I need to tell anyone I have/have had MRSA?

We will write to your GP or community nurse. You should also



tell anyone caring for you that you have or have had MRSA. In particular:

- when you are admitted to hospital
- before you are admitted to a nursing or residential home
- before an outpatient appointment or a visit to their GP.

Who can I contact with queries and concerns?

If you or your carers have any questions about your treatment or any information in this leaflet, please do not hesitate to ask one of the members of the nursing or medical staff on your ward.

You can also contact the Infection Prevention and Control teams at our hospital sites.

King's College Hospital, Denmark Hill

Tel: **020 3299 4374**

Email: **kch-tr.KCH-IC-Nurses@nhs.uk**

Princess Royal University and Orpington hospitals,
Beckenham Beacon and Queen Mary's Hospital, Sidcup

Tel: **01689 863463**

Email: **kch-tr.PRUHInfectionPreventionandControlNurses@nhs.net**



Patient Advice and Liaison Service (PALS)

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS:

Tel: **020 3299 3601**

Email: **kch-tr.PALS@nhs.net**

You can also contact us by using our online form at

www.kch.nhs.uk/contact/pals

PALS at Princess Royal University Hospital,

Farnborough Common, Orpington, Kent BR6 8ND

Tel: **01689 863252**

Email: **kch-tr.palskent@nhs.net**

If you would like the information in this leaflet in a different language or format, please contact PALS on 020 3299 1844.

Further information

NHS Choices

Visit the NHS Choices site for more information about MRSA

www.nhs.uk