

MRSA

Information for patients and visitors

This leaflet explains how we test for, treat and prevent infection with a bacterium (germ) called MRSA (methicillin-resistant *Staphylococcus aureus*).

What is MRSA?

Staphylococcus aureus is a bacterium (germ) commonly found on the skin of adults and children and often causes no harm.

When *Staphylococcus aureus* becomes resistant to methicillin and a range of other antibiotics, it means that those antibiotics no longer work. It is called methicillin-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.

MRSA can either colonise the skin or cause an infection.

Colonisation occurs when MRSA is carried on the skin and in areas such as the nose. It is usually detected by 'swabbing' the skin and nose. We call this MRSA screening. Colonisation does not cause harm unless it progresses to infection.

Infection occurs when MRSA invades a wound or vulnerable patient. MRSA infection must be treated with antibiotics, which may need to be given through an intravenous infusion or drip. However, remember that MRSA does not always cause an infection and does not always need antibiotics.

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.

Who is most at risk of an MRSA infection?

MRSA can occur in any care setting and some people pick up the bacteria in the community. People in hospital are more vulnerable to MRSA infection. This is because:

- patients often have a way for 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 – this makes them more likely to have an infection
- they are surrounded by many other patients and staff, so MRSA can spread more easily on hands of staff and patient equipment

How did I get MRSA?

Some people can carry MRSA without knowing it, so you may have got it before your admission. MRSA can be passed on by contact with someone carrying the germ on their skin or on equipment, clothing or possessions that have not been cleaned properly. It is a myth to think of MRSA just as a 'hospital super bug'.

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 to take samples from areas such as the back of your mouth, the inside of your nose, your perineum (the skin between your anus and your vagina or scrotum) or your groin, and from any wounds or breaks in your skin, drips into your vein or bladder catheter.

If you are admitted for a planned (elective) procedure, you will be screened when you come in by a pre-admission nurse.

If you are admitted as an emergency, we will screen you when you are admitted.

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 (germ). They will also clean their hands frequently. We may also move you to a single occupancy room.

Sometimes it may be necessary to delay your elective operation if the clinical team advise it so you can have your MRSA treated with the protocol described below before your operation. The team will explain this to you.

How is MRSA treated?

If your screening swab results come back as MRSA positive, you will be informed by the pre-admission nurse, your GP; or if you are in hospital by the nurse or doctor looking after you on the ward.

If you are colonised with MRSA

We may prescribe you a course of treatment that involves using an antiseptic wash 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 retested for MRSA three days after the end of the course of skin treatment. It may take several days to get the results of this test.

If the test 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 antibiotic nasal ointment so you can finish at home.

How to use the antiseptic wash

The antiseptic wash must be used as prescribed. You should use it as both a soap and a shampoo for a shower, bath or wash every day for five days. Avoid getting it in your eyes or ears. Do not share the bottle with anyone else. Do not use it with other shampoos, soaps or moisturisers. Ask for a new bottle if you run out.

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, armpits and groin
4. Rinse off with clean water
5. Wash your hair on day one and five with antiseptic was and rinse off thoroughly after application

What are the symptoms of a MRSA infection?

You get the same symptoms as you would with any other bacterial infection. These include:

- fever
- feeling generally unwell
- fast pulse (tachycardia)
- redness on white skin tones or discolouration on darker skin tones, swelling, pain or heat at a specific site (where a medical device is inserted)

How to use the nose ointment

The antibiotic nose ointment comes in a small tube. You need to use it three or four times a day, depending on which ointment you need:

1. Squeeze a small amount of the ointment on a clean finger
2. Put the ointment on the insides of both 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 antibiotic nose ointment treatment as people who are colonised with MRSA. We will also prescribe you antibiotics.

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 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 helping you to wash.

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 or 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, particularly:

- when you are admitted to hospital
- before you are admitted to a nursing or residential home
- before an outpatient appointment or a visit to your 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 team at our hospital sites:

King's College Hospital, Denmark Hill

Tel: **020 3299 8173**

Email: **kch-tr.KCH-IC-Nurse@nhs.net**

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

Tel: **01689 863459**

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

MyChart

Our MyChart app and website lets you securely access parts of your health record with us, giving you more control over your care. To sign up or for help, call us on 020 3299 4618 or email kings.mychart@nhs.net. Visit www.kch.nhs.uk/mychart to find out more.

Sharing your information

King's College Hospital NHS Foundation Trust has partnered with Guy's and St Thomas' NHS Foundation Trust through the King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas' hospitals. King's College Hospital and Guy's and St Thomas' NHS Foundation Trusts share an electronic patient record system, which means information about your health record can be accessed safely and securely by health and care staff at both Trusts. For more information visit www.kch.nhs.uk.

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

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. They can also pass on praise or thanks to our teams.

Tel: **020 3299 4618**

Email: **kings.pals@nhs.net**

If you would like the information in this leaflet in a different language or format, please contact our Interpreting and Accessible Communication Support on 020 3299 4618 or email kings.access@nhs.net