

Carbapenemase-producing enterobacterales (CPE)

Information for patients and visitors

This leaflet explains how we test for, treat and prevent the spread of bacteria (germs) called *Carbapenemase-producing enterobacterales* (CPE). It also explains how you can help to prevent their spread in hospital. If you have any questions or concerns, please do not hesitate to speak to the team caring for you.

What is CPE?

Carbapenemase-producing enterobacterales (CPE) is a large family of bacteria (germs) that usually lives harmlessly in your gut. This is called colonisation. Someone who is colonised is called a carrier. You will not know you are a carrier unless you are tested.

Carbapenems are one of the most powerful types of antibiotics. *Carbapenemases* are enzymes (proteins), made by some strains of these bacteria, which allows them to destroy carbapenem antibiotics and so the bacteria are resistant to the antibiotics.

When does CPE become harmful?

Most of the time, CPE does not cause any problems and no treatment is needed. However, if the bacteria get into the wrong place, such as the bladder or bloodstream, they can cause an infection, particularly in patients with a low immunity.

This can be a problem because these bacteria:

- can spread to and cause infection in other vulnerable patients
- are frequently resistant to most or all of the commonly used antibiotics in hospital – this makes infections caused by this family of bacteria very difficult to treat

How is CPE spread in hospital?

These bacteria can be spread:

- from person to person, on the hands and skin of staff, students, patients and visitors, by touching someone who is infected or colonised
- by touching room surfaces and objects that have CPE on them – this includes equipment, shared electrical or medical devices, surfaces around patients, commodes and toilets

Who is at risk of getting a CPE infection?

People who have a reduced ability to fight infection are at risk most. This includes (but is not limited to) people:

- with cancer
- having dialysis and those with IV catheters (drips) or bladder catheters inserted
- being treated in an Intensive Care Unit, including those with tracheostomies (a breathing tube inserted in the throat through a small incision)
- who are taking medications to suppress their immune system, including patients who have had transplants
- with chronic wounds
- with enterostomies (a surgically created opening in the abdomen of the bowel to the outside which allows the body to empty poo)

How do I know if I have CPE?

One of the main ways in which CPE is spread is by the transfer of patients between wards and between hospitals. We will ask to screen (test) you for CPE if:

- you are transferred to a ward with vulnerable patients, such as Intensive Care Units
- you were admitted to a hospital, abroad or in the UK, in the last 12 months
- you are moved here from another hospital in the UK
- we know or suspect you have encountered someone who has CPE
- we know that you were colonised with CPE during a previous admission to hospital

We usually take samples from your bottom with a swab. We may also test samples of your poo and other relevant sites (such as wounds and/or line sites). These samples are tested in a laboratory to look for CPE. We normally tell you the results within three days.

What measures do we take to prevent the spread of CPE?

CPE does not usually cause infections in healthy people but can be spread by them. For this reason, strict infection prevention and control measures will be put in place.

- Patients must wash their hands with soap and water before eating meals and after using the toilet.
- Anyone helping a patient with their personal care must wash their hands with soap and water before and after.
- We may have to do extra cleaning in some areas. We will ask you to keep surfaces around your bed free of clutter to allow this cleaning to take place.
- We may close a ward to admissions and restrict visiting.

Further isolation precautions may be put in place.

- If we strongly suspect you might be a CPE carrier (colonised), we will move you to a single room with your own toilet facilities to prevent the spread of the bacteria. Your door will need to remain closed and you will need to remain in the room. Where a single room is not available, we may place you together with other patients with a similar risk profile.
- We will put a sign on the isolation room door to remind everyone of the precautions they need to take.

- Healthcare staff must wash their hands and use gloves and aprons when caring for you.
- Visitors must wash their hands when they enter and leave the room and may be asked to wear aprons or gowns.
- Visitors must not use patient bathrooms.
- You must avoid touching medical devices (if you have any) such as bladder catheter tubes or drips in a vein, particularly when they enter the body.

What happens if I have CPE?

- If the screening test shows you are colonised with CPE (you test 'positive' but have no signs of infection), we will put you in a single room with your own toilet facilities for the rest of your hospital stay or treatment. We do this to limit the likelihood of other patients being colonised. Your door will need to remain closed, and you will need to remain in the room.
- You will be managed as CPE colonised for any future hospital admissions.
- If you are shown to have an infection caused by CPE, we will treat you with antibiotics.

How did I pick up CPE?

It can be difficult to say when or where you became colonised or infected. There is a greater chance of picking up CPE if you have been a patient in a hospital abroad or in a UK hospital that has had patients carrying these germs, or if you have been in contact elsewhere with someone who is colonised.

What happens when I go home?

You can go home if you are colonised. You do not need to take any special measures or have treatment, as we will have treated any infection before you leave hospital. You can carry on as normal and continue to maintain good hand hygiene.

If you have any concerns, contact your GP for advice. Your GP will receive notification that you are CPE colonised.

Do I need to tell anyone I have CPE?

Before you leave hospital, ask your doctor or nurse for a letter that says you have had an infection or have been colonised with CPE. You should tell anyone caring for you that you have had CPE and give them the letter, particularly if you or a member of your household are admitted to hospital.

How long will I be colonised with CPE?

There is no clear answer as to how long you will be colonised with CPE. Treatment with antibiotics for unrelated infections may affect the length of time. We will manage you as CPE colonised if you need to be admitted in the future.

Who can I contact with queries?

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