

MRSA

Meticillin Resistant *Staphylococcus aureus*
Infection Control Department



Patient information leaflet

This leaflet has been written to help you understand what MRSA is and how being MRSA positive may affect your hospital stay.

What is MRSA?

MRSA stands for Meticillin (M) Resistant (R) *Staphylococcus* (S) *aureus* (A). It is a variety of a germ called *Staphylococcus aureus* or '*Staph. aureus*'. *Staph. aureus* is carried usually in the nose, armpits, groin or buttocks of around 1 in every 30 people, usually without causing any harm. These people are said to be colonised (carriers) with *Staph. aureus*. However in certain circumstances, particularly when the skin is broken e.g. with cuts, sores and wounds, *Staph. aureus* can cause boils and other infections.

Most *Staph. aureus* infections can be treated with commonly used antibiotics. In recent years some strains of *Staph. aureus* have become resistant to some antibiotics. Meticillin resistant *Staph. aureus* (MRSA) is a *Staph. aureus* which has become resistant to commonly used antibiotics and, on infrequent occasions, it can cause an infection that can be more difficult to treat. However, MRSA infection is still treatable. MRSA strains of *Staph. aureus* are no more aggressive than other strains of *Staph. aureus*.

How does it spread?

MRSA is usually spread by hands that have been in contact with someone who has the germ in their nose or on their skin. MRSA has also been found in items, such as clothes, towels, sheets from someone who has MRSA on their skin and/or when touching surfaces or objects that have MRSA on them. MRSA can be found in the community and in hospitals.

Why is MRSA a problem in hospitals?

Usually MRSA causes no harm to people but just lives on the body. The reason that hospital staff are worried about MRSA is because it could spread and cause an infection to other hospital patients who are severely ill or those who have a way for bacteria to get into their body, such as wounds, burns, feeding tube, drip into a vein, or urinary catheter.

If I have a MRSA positive result how does it change the way that you look after me?

MRSA infection can be treated with antibiotics. If you are 'just' carrying MRSA, no antibiotics are required.

To protect you and other patients, the hospital may take the following precautions:

- The staff that are looking after you will sometimes be wearing aprons or gloves.
- You may be moved into a single room in order to prevent MRSA spreading to other patients in the hospital
- You may also be given a course of antiseptic treatment

MRSA antiseptic treatment has been shown to be useful at reducing and sometimes completely removing MRSA from skin, particularly, before surgery or other clinical procedures. All surgery carries a risk of infection; however the risk may be reduced by using this treatment before surgery. Please discuss any concerns you have about your surgery with your doctor.

What does the MRSA antiseptic treatment consist of?

This is a course of daily washes with an antiseptic wash and antibiotic nasal cream (3 times a day). A full course consists of 5 days of treatment, however even part of a course may be beneficial before surgery. It can be done at home before your operation or whilst in hospital.

1. Antiseptic wash (e.g. Octenisan®)

Use this daily when you wash in place of your normal soap, preferably in the shower (or bath if no shower available).

- Wet your skin.
- Apply the antiseptic wash to skin using your hand or a disposable washcloth (do not put in your water like a bubble bath). Pay particular attention to your armpits, between your legs and genitals (for external use only).

Ensure a 1 minute contact time.

- Rinse.
- Dry with a freshly laundered towel, use a clean towel each day.
- You can use moisturiser afterwards.
- Wash your hair twice in the 5 days using the antiseptic wash in place of shampoo (You may wash your hair on other days using your own shampoo). Rinse (conditioner may be used after rinsing).



2. Antibiotic nasal ointment – Mupirocin (Bactroban®)

Use this 3 times per day for 5 days (a total of 15 doses). If you are having surgery you should have at least 1 dose prior to your operation.



- Apply a small amount (3-4mm in diameter, about the size of a match head) to each nostril using a clean cotton bud which should be rotated in each nostril. (Do not push the bud up too far).
- Do not insert the tube of ointment up your nose, as this will contaminate the tube.
- Wash your hands after applying ointment.

N.B. Discontinue the antiseptic wash (Octenisan®) and mupirocin (Bactroban®) immediately if any irritation develops and speak to your doctor.

If your MRSA is resistant to mupirocin you will have an alternative nasal treatment called Naseptin®. This is used four times a day with the antiseptic wash for a total of 10 days.

Do not use Naseptin® if you are allergic to peanuts as this treatment contains nut oil.

If you remain in hospital, you will have some swabs taken once you have completed the course which is 5 days of antiseptic treatment followed by 2 days without treatment. If you have 3 consecutive sets of swabs which are MRSA negative, you will no longer require isolation precautions. Swabs are taken at least 48 hours apart. Results take about 3 working days.

If you are discharged during the course of your treatment continue the treatment, at home for a maximum of 5 days. Re-screening swabs are not normally required.

If you are having treatment at home before being admitted for your operation the pre-assessment clinic will advise if re-swabbing is required.

Are my friends and family at risk from MRSA?

MRSA does not normally affect healthy people, but they may carry the organism in their nose or on their skin. There is no evidence to indicate that MRSA poses a risk to healthy individuals including babies, children and pregnant women. The only significant risk is to other hospital patients.

Therefore, as an in-patient, if your visitors are visiting other people or other wards, ask them to see those persons first before they visit you and use the alcohol sanitising foam provided before and after visiting.

Your visitors:

- should use alcohol sanitising foam or thoroughly wash and dry their hands when entering and before leaving the room.
- should cover any cuts with a waterproof plaster.
- do not need to wear gloves or an apron.

Does being MRSA positive delay my going home?

- Most patients do not have to stay longer in hospital because they are carrying MRSA.
- Your clothes should be washed as normal on a hot domestic wash.
- If you go to another hospital for some reason, either as an in-patient or an out-patient, it would help in your care if you could inform the staff that you have had MRSA in the past.

Key reference source and for further information

- www.nhs.uk/conditions/mrsa/
- Coia, J. E. et al. (2006) 'Guidelines for the control and prevention of meticillin-resistant Staphylococcus aureus (MRSA) in healthcare facilities', The Journal Of Hospital Infection, 63 Suppl 1, pp. S1–S44. Available at: [https://www.journalofhospitalinfection.com/article/S0195-6701\(06\)00002-8/pdf](https://www.journalofhospitalinfection.com/article/S0195-6701(06)00002-8/pdf) (Accessed: 26 February 2019).

Contact details

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PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–3.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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