If I am in a single room with special instructions on the door, can I go for a walk?

Yes. But do wash your hands or clean your hands with the hand rub at the door before going for the walk and upon returning to your room. Inform your nurse when you are going for a walk. Refrain from entering other patients rooms.

Will I ever lose MRSA?

Many people lose MRSA when they leave hospital. Some people may carry MRSA for long periods. If you are an MRSA carrier, please notify the staff if you are ever admitted to any hospital in the future.

What happens when I go home?

You continue with your normal family life. Your clothes, bed linen and towels can be washed in the normal way as part of the family wash. It is advisable not to share personal hygiene items such as razors, face flannels and towels. Other personal effects do not require any special treatment or cleaning.

Are my family or friends at risk of acquiring MRSA?

No, not if they are in general good health. If you have a sick relative at home and if you are directly involved in his/her care (such as changing wound dressings or giving injections), be very careful to wash your hands before and after any such procedure. However this is recommended for all carers irrespective of whether they have MRSA or not.

For more information please contact the infection control team in Blackrock Clinic.

Compiled by Joanne Flanagan,
Clinical Nurse Specialist, Infection Control
September 2007

Authorized by Dr Brian O Connell
Consultant Microbiologist
September 2007
What is Staphylococcus aureus (S. aureus)

S. aureus is a bacterium (or germ) which lives on the skin and in the nose of approximately 30% of healthy people without causing infection. Such people may be said to be ‘colonised’ with S. aureus. S. aureus is also a common cause of infection, usually if there is a break in the skin (for example, a cut or a wound). S. aureus infections may be minor (for example, boils, styes and pimples) or more serious if the infection is in the heart, bone, wound or blood stream. If an antibiotic is required, your doctor will usually prescribe a penicillin-based antibiotic such as flucloxacillin. An alternative may be used especially in people who are allergic to penicillin.

How is S. aureus spread?

S. aureus can be acquired in both the community and in hospitals. In hospitals, it is mainly spread from person to person particularly from health care workers’ hands if they are not washed or cleansed between contact with different patients. It can be acquired from surfaces or objects contaminated with S. aureus. Surface contamination may occur when S. aureus-contaminated skin scales are shed onto surfaces and if contaminated hands are not washed or cleansed following patient contact. S. aureus may also by spread by sharing personal hygiene items, for example, razors, towels, soaps or washcloths. Sharing newspapers and books is not a problem.

What is MRSA?

MRSA stands for meticillin-resistant S. aureus and refers to strains of S. aureus that have become resistant to penicillin-based antibiotics such as flucloxacillin. They are called meticillin-resistant because meticillin was the first member of this class of antibiotic. Resistance was recognised in 1961. Some strains of MRSA may be resistant to many other antibiotics also. Antibiotics which are used to treat MRSA infection, are expensive and treatment may be required for prolonged periods (this can be discussed with your doctor). As with S. aureus, a person may ‘carry’ or be ‘colonised’ with MRSA without having an infection.

How is MRSA spread?

MRSA is spread in exactly the same way as S. aureus.

Why is there concern about MRSA?

Any type of infection causes concern. The risk of getting an infection with MRSA is no greater than the risk with other organisms. The problem with MRSA is that it may be resistant to many antibiotics limiting the choice of antibiotics available to treat infection. This may make some MRSA infections more difficult to treat, particularly if hospital-acquired.

Who is at risk of getting MRSA infection?

Any person who is sick, particularly those in hospital with drips, drains, open wounds, etc. are at risk of getting an infection. Such infections may include infection with MRSA.

How do I know if I have MRSA?

You will most likely be informed by your doctor if MRSA is found in any specimen taken from you. Specimens, which may be examined for MRSA, include swabs from wounds, skin or nose and samples of urine, sputum or blood. There are many reasons why a specimen may be taken from you. These reasons may include:

- If you are admitted to hospital with a temperature or develop a temperature while in hospital
- If you been in hospital in the previous 6 months
- If you are transferred from one hospital to another
- If you have had MRSA on a previous admission to the hospital (to check if you are still carrying MRSA)

Note: this is not a complete list.

If MRSA is found, what happens?

More swabs may be taken from you, particularly from your nose, groin and wound(s) if present to identify where you are carrying MRSA. You will be nursed in a single room. This is to reduce the risk of spread to other patients.

Instructions on how to enter and exit the room will be placed on the door of your room. All persons entering the room, including your visitors are requested to adhere strictly to the following instructions:

- Cleanse hands using an alcohol hand rub on entering and leaving the room
- Put on a disposable plastic apron entering the room. This apron is removed inside the door just before leaving the room.

The ward nurse-manager should be informed if any hospital staff including doctors, nurses, catering staff etc. do not comply with these instructions.

Would anything else reduce the risk of spreading MRSA?

Yes. Good basic hygiene measures are extremely important, not only for hospital staff but also for patients and visitors. These measures include:

- When washing hands or applying hand cleaning rub, be careful to include finger tips and thumbs in the process
- Remind staff to wash/clean their hands before touching your drips, drains or dressings if you think they have not done so
- Do not share other patients’ personal hygiene items such as razors, washcloths, soap or combs
- Wash your hands after using the toilet
- Visitors should apply an alcohol hand cleansing rub to their hands on entering/leaving the wards and before visiting other patients in the ward or in the hospital
- Do not sit in other patients rooms