

This document is intended for information purposes only and should be used in conjunction with the advice and further details to be discussed by Mr. Ahmed at your consultation meeting.

What is MRSA?

MRSA stands for methicillin-resistant Staphylococcus aureus. MRSA is a type of bacterium that is a common cause of hospital infections.

Bacteria are microscopic living organisms. Some are beneficial and some are harmful.

Staphylococcus aureus is a common type of bacterium that can be harmful and is carried in the nasal passage, armpit or groin of 1 in 3 healthy people. Resistance to the antibiotic methicillin, and usually some other antibiotics, means that MRSA infections are more difficult to treat.

MRSA can live on your body without causing any symptoms (colonisation). You will not have any pain or discomfort but MRSA can penetrate into your body (infection) or spread to someone else.

Most MRSA infections are minor skin infections. Occasionally MRSA can cause serious infections such as heart-valve and artificial-implant infections as well as blood poisoning.

Am I at risk of getting an MRSA infection?

People with a healthy immune system are usually not at risk. If you are unwell or are having a hospital operation or invasive procedure, you are at an increased risk.

MRSA is usually spread by physical contact, either directly from the hands of healthcare workers or indirectly from contaminated surfaces and objects. Keeping your hands clean is essential to reduce the spread of MRSA. You

should wash your hands regularly using soap and water, or alcohol gel.

You should check with any member of the healthcare team that they have washed their hands before treating you. You should also avoid touching any areas of broken skin or wound dressings.

How do you know if I have MRSA?

Most people admitted to hospital are screened to find out if they are colonised with MRSA. MRSA screening happens either before you arrive or within a day or two. You may also be screened again during your hospital stay.

Screening usually involves a member of the healthcare team using a swab to take a sample from your nasal passage (see figure 1).

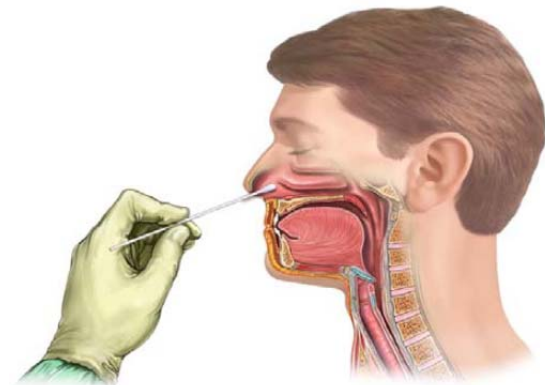


Figure 1

Taking a sample from the nasal passage

Sometimes the sample is taken from your armpit or groin. The swab will be sent to the laboratory for analysis.

If a member of the healthcare team suspects you may have an MRSA infection, they will use a swab to collect a sample from

the site that is thought to be infected. If you do have an infection, the results will be used to decide the most effective antibiotic treatment.

What treatment will I need if I have MRSA?

If you are colonised with MRSA, you may be placed in isolation away from other patients. You may also need to have a special ointment in your nasal passage two to three times a day to remove MRSA from this area, or you may need to wash using medicated bodywash and shampoo. If you are found to be colonised with MRSA before you are admitted to hospital, you may have this treatment at home.

If you are infected with MRSA, you will usually be placed in isolation away from other patients and given antibiotics to treat the infection. You may be cared for in an area with other patients who also have MRSA.

The type of antibiotics that are used to treat your infection will depend on where you are infected and which antibiotics the MRSA is sensitive to. Sometimes you may need surgery to remove infected tissue or any artificial implants.

Can my visitors get MRSA?

MRSA does not usually cause infections in healthy people, so visitors have a low risk of MRSA infection, even if you are infected or colonised. However, you should ask your visitors to wash their hands before and after touching you or surfaces or objects near you.

What happens after I go home?

Even if you were treated for MRSA during your stay in hospital, you may continue to be colonised after you return home. However, the risk of spreading MRSA to other healthy people is low.

You should continue keeping your hands clean and use local antiseptic cream and

dressings on minor cuts. If you get a temperature or feel unwell, notice pus in a wound, or if a wound becomes red, sore or painful, you should let your GP know.

If you have any questions or want to know about your admitting hospital's record, please ask your pre-assessment nurse

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