

Decolonisation

If it is possible to stop you being a carrier of the bacteria with a decolonisation programme, you should definitely take the opportunity to do so. Infected wounds do, however, have to be healed beforehand. The process will need the support of your GP, who will discuss measures with you and will prescribe the necessary medication, such as antiseptic nasal ointment or antiseptic gargle solution and lozenges which are effective against MRSA. You will generally have to cover the cost for the necessary body care products yourself.

The decontamination procedure is, for example, explained in detail in the decolonisation fact sheet for MRSA carriers, issued by the Baden-Württemberg MRE network, and can be downloaded at www.mre-netzwerk-bw.de.

Your local contact is your local **Health Authority**

Additional information

Baden-Württemberg State Health Office (Landesgesundheitsamt Baden-Württemberg) Coordinating body: BW MRSA Network mre-netzwerk@rps.bwl.de www.mre-netzwerk-bw.de

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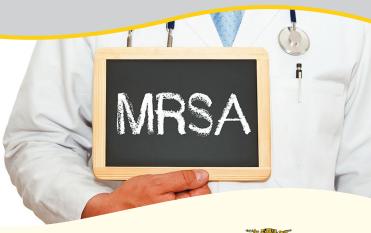
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Information on MRSA for outpatients







Dear Patient,

A microbiological smear test that is part of your medical treatment has detected a specific bacterium which is difficult to treat with suitable antibiotics if it leads to an infection. This fact sheet has important information about the bacterium and the necessary hygiene measures to prevent it from spreading.

General information

We are all host to a large number of bacteria, and millions of these microbes live on the skin, mucous membranes and especially in the intestines.

The bacterium *Staphylococcus aureus* can be found in the front section of the nose and sometimes on the skin of many healthy people without making the host ill.

When it becomes resistant to various antibiotics it is called MRSA: Multi-Resistant or Methicillin-Resistant Staphylococcus aureus.

Usually MRSA is not dangerous for healthy individuals outside the hospital setting. When it comes into contact with hospital patients, the risk for transmission and a possible infectious illness is considerably increased, for instance if the patient has an injury or undergoes a medical procedure and the bacteria travel from the skin or mucous membranes into the underlying tissue and then into the rest of the body.





Once in the body it can cause inflammation and abscesses, and in patients with a weakened immune system it can also lead to serious infections, such as blood poisoning and pneumonia.

As many antibiotics are no longer effective against MRSA an infection can only be treated with active ingredients usually held in reserve and even these are sometimes unsuccessful.

If the pathogens are only on the skin without causing symptoms this is called a colonisation. In this case, certain measures can be taken to remove the bacteria from the skin. These measures would be full body washes, mouth rinses with antiseptic active substances and the use of an effective nasal ointment.

In hospital the risk of transmission is considered to be high because this is a place where there are many susceptible patients, some of whom will have unhealed wounds, will be recently operated, be artificially respirated or have catheters. Hospital staff also have to protect themselves by applying barriers so that they do not transfer the bacterium from one patient to another.

This is why protective measures to prevent transmission are employed. These include isolating patients in single rooms, protective clothing for staff and visitors and hand disinfection when leaving the room.

Similar measures may also be arranged in care homes. How and for how long these measures are employed is decided by the GP and the care home management. In the doctor's practice, or when the doctor or mobile nursing service visit you at home, the staff will wear a gown, gloves and possibly also a mouth-nose protective mask during your care, as prescribed in the hygiene plan defined by their facility.

Outside a medical setting the risk of transmission and illness is very low. At home you can continue to have social contact as normal. The same applies to taxi journeys, private visits, taking part in communal events, shopping and other activities.

There is usually no increased risk for bacterial transmission for healthy individuals, pregnant women or children. This also essentially applies if you are in shared or sheltered accommodation. It is only important to be careful if you have physical contact with people who have open wounds, or tumour or leukaemia diseases.

The risk of transmission can be reduced to a minimum with normal physical hygiene. This includes, for instance,

- Regularly washing your hands
- Having a bath or a shower with soap every day
- Throwing away used tissues
- Washing your hands after blowing your nose
- Appropriate and regular change of clothes and bed linen
- Strict personal use of towels, flannels, razors, combs and brushes and body care products such as pots of cream, roll-on deodorants and other hygiene articles

You should not wash your clothes by hand, but by washing machine at the highest possible temperature for that garment.