

Methicillin resistant Staphylococcus aureus (MRSA)

An information leaflet for patients and relatives

What is MRSA?

MRSA stands for Methicillin (**M**) resistant (**R**) Staphylococcus(**S**) aureus (**A**) which are strains of organisms (germs) known as Staphylococcus aureus which are resistant to several widely used antibiotics, including Penicillin. This can make infections caused by MRSA harder to treat than other bacterial infections.

Staphylococcus aureus is a normal skin organism, which up to 30% of the population carry on their skin as part of their normal body bacteria, commonly in the nostrils, groin and folds of the skin. MRSA are resistant to treatment with the commonly used antibiotics (penicillins). MRSA can cause the same type of infections caused by antibiotic sensitive Staphylococcus aureus.

The majority of people are 'colonised' with MRSA, which means they carry it on their skin harmlessly and it has no ill effects.

In a small number of people, it may cause infections ranging from small skin infections to serious infections such as blood stream infections.

How do you know its MRSA?

People with MRSA do not look any different to others. This is because there are no specific signs and symptoms of MRSA. It is only if there is an active infection where symptoms like a raised temperature, wound swelling and pus may be seen. This is the same for infection caused by any organism. Doctors and nurses can take swabs from a patients' nose and skin to check for MRSA. Swabbing is painless and only takes a few minutes.

How did I get MRSA?

MRSA can be found on people both in the hospice and in the general population. It can be brought in from the community, as well as acquiring it in the hospice

How is it spread?

It is usually spread by person to person contact, mainly by hands. This is why good hand hygiene is so important. It may also be found in dusty environments. Therefore, it is important to keep your locker and bedside table tidy and clutter-free to allow for cleaning

I have been told I am MRSA positive, what happens now?

All our beds on the Inpatient Unit (IPU) are in single rooms. Whilst you are in the hospice you will need to remain in your room with infection control precautions in place until you have had three sets of negative swabs. Our IPU staff caring directly for you will wear a plastic apron and gloves, and will clean their hands, again to protect vulnerable patients.

How is it treated?

You will be given a skin treatment, including a medicated body wash or wipes, shower cap and an ointment for your nose. Nursing staff will explain how to use the treatment.

Can I still have visitors?

Yes, you can have visitors, as healthy people, pregnant woman, children and babies are at very little risk of developing MRSA infection.

Visitors should wash their hands with soap and water or use alcohol hand rub on entry to the IPU and before leaving the IPU.

Visitors do not need to routinely wear gloves and aprons, but they may be needed if they are helping with your personal care.

Visitors should sit on the chairs provided, not on your bed.

Good hand hygiene is one of the best ways of tackling MRSA. Use soap and water/hand gel to clean your hands regularly.

When can I go home?

Our IPU team will assess you and discharge you from the hospice when you are fit enough to go home.

If you are midway in your skin treatment, please complete it at home.

If you have a wound and are concerned it is looking infected, seek further medical advice.

Laundry from an MRSA positive individual can be washed in the usual way, however, if the wound has leaked onto an item, wash on the hottest cycle possible for the item, and for heat sensitive laundry, use an appropriate disinfectant following the manufacturers' advice.

If you are being discharged from the hospice to a nursing or residential home, the home will be informed by the IPU team prior to your discharge.

(Text adapted from the MRSA leaflet from the Department of Infection Prevention and Control)