

## Will MRSA go away?

MRSA may go away by itself but it is known that patients can remain colonised for a long time. So, whenever you are admitted to hospital you may be placed in a single room and screened for MRSA (further sets of swabs taken from your nose, groin/perineum and any wounds you may have).

## At home

The very best way to prevent the spread of MRSA to others in your household is by frequent, good hand hygiene.

Shower or bath daily using soap and clean towels and avoid sharing towels and facecloths with other family members.

Hands should be washed with soap and water after going to the toilet, blowing your nose or touching wounds/sores and before food preparation.



## Is MRSA dangerous to my family/Whanau?

No, MRSA is only a problem for patients when they are sick in hospital. If a family/Whanau member or visitor picks up the bacteria, it will cause no harm.

MRSA is a bacterium that is spread by direct contact. It is important that visitors **wash their hands** before leaving the room and before and after assisting with any of your direct care.

▶ **If your visitors are seeing other patients in hospital they should visit you last.**

## What can I do?

Please tell your GP, or doctor, nurse or caregiver on admission to a hospital, that you have had MRSA in the past.

## References:

Guidelines for the Control of Methicillin-resistant Staphylococcus aureus in N.Z. Ministry of Health, Wellington, NZ (2002).

Guidelines for the control and prevention of methicillin-resistant Staphylococcus aureus (MRSA) in healthcare facilities by the Joint BSAC/HIS/ICNA Working Party on MRSA. The Journal of Hospital Infection Vol 63 Supp 1. May 2006

[www.surv.esr.cri.nz/PDF\\_surveillance/Antimicrobial/aMRSA\\_2009.pdf](http://www.surv.esr.cri.nz/PDF_surveillance/Antimicrobial/aMRSA_2009.pdf)

Guidelines for the prophylaxis and treatment of Methicillin-resistant Staphylococcus aureus (MRSA) infections in the UK. Journal of Antimicrobial Chemotherapy (2006) 57, 589-608

# MRSA

(Methicillin Resistant  
Staphylococcus aureus)

## Patient Information Pamphlet

Infection Prevention and Control Service, ADHB.

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## What is MRSA?

MRSA stands for Methicillin Resistant Staphylococcus aureus. Staphylococcus aureus (Staph. aureus) is a bacterium or germ that is commonly found on the skin and usually causes no harm. It can also be found in the warm, moist environment of the nose and groin/perineum. MRSA has acquired resistance to a group of commonly used penicillin-like antibiotics.



MRSA may be present on the skin for a long time without causing any harm. If it gets into a wound or open cut it can cause an infection.

Infections caused by MRSA can be difficult to treat. Therefore different antibiotics other than the ones normally used are required to treat the infection. In hospitals it is important to prevent its spread to other patients.

## How is MRSA spread?

Approximately 30% of healthy people carry Staph. aureus on their skin. MRSA is spread from patient to patient by direct skin to skin contact, e.g. by a healthcare worker touching a patient who is colonised or infected with MRSA, and then touching another patient without washing their hands between contact.

## What does Colonisation mean?

This occurs when MRSA is found on your skin, usually in your nose or the skin of your groin/perineum. It causes no harm.

## What does Infection mean?

Infection occurs when bacteria multiply and invade surrounding tissue, for example, a wound. You will require different antibiotics to those used routinely to treat such an infection when it is caused by MRSA.

## What is Screening?

A process where swabs are taken from your nose, groin/perineum (between your legs) and from any wounds that you may have. These are sent to the laboratory to see if you are colonised or infected with MRSA.

## Why am I having swabs taken?

- ▶ You may have been found to be colonised or infected with MRSA in the past.
- ▶ You may be cared for in a community setting, for example, a rest home, where the risk of acquisition is higher than for the general community.
- ▶ You may have been in another hospital or a shared room where transmission between patients has been reported.

## What precautions are taken to prevent the spread of MRSA?

In hospital the people caring for you will take extra precautions and you will be placed into a single room. The staff will follow what is called Contact Precautions:

- ▶ You will be placed in a **single room** to minimise contact with other patients. Staff will wear **gloves** when having direct contact with you or your clothing and bedding to prevent MRSA from being transferred onto their hands.
- ▶ Staff will wear **gowns** when having direct contact with you, your clothing or bedding.
- ▶ Occasionally staff will wear a **mask** when having close contact with you. You may also be asked to wear a mask when leaving the room.
- ▶ Everybody leaving the room must wash their hands or use the alcohol hand gel provided.



## Can I come out of my room if I am in isolation?

Yes, you can come out of your room and mobilise around the ward. If you have any wounds these should be covered with a waterproof dressing.

Wash your hands or use the alcohol hand gel prior to leaving the room.

Your usual treatments can continue, except that staff will be required to take extra precautions when having direct contact with you, e.g. wearing gloves, gowns and possibly a mask.

## How long will I be in isolation?

This will vary from person to person. Usually patients are in isolation (single room) for the duration of their hospital stay and future admissions.