

M R S A Information



Staphylococcus aureus

MRSA is a staphylococcus aureus infection that is resistant to methicillin (a type of penicillin.)

The bacteria is no more likely to cause infection than any other bacteria, but it is harder to kill.

What is MRSA?

Staphylococcus aureus are bacteria that may commonly live in the nose, on skin and in moist areas of the body. This is called colonization, which occurs with other bacteria all over our bodies. It does not normally cause a problem. *Staphylococcus aureus* can cause infections such as boils and abscesses. In the hospital it can cause serious infections in the blood, lungs or other areas for a person who is already ill or has had surgery.

Staphylococcus aureus can develop resistance to certain antibiotics. When this happens, it is called **Methicillin-Resistant Staphylococcus Aureus**, or MRSA. Infections caused by MRSA are not more serious, but can be harder to treat as different antibiotics must be used.

How is MRSA spread?

MRSA is spread from one person to another by contact. MRSA can be present on hands, either from touching the skin or contaminated material, such as towels, sheets and wound dressings. When hands are washed thoroughly or rubbed with an alcohol-based hand sanitizer MRSA is removed or killed.

MRSA can live on surfaces, so hands can very quickly become soiled again. Frequent hand cleaning is necessary to prevent spreading MRSA.

How would I get MRSA?

MRSA has been found in the community and in hospital settings, on people and their surroundings. Healthy people are at low risk of acquiring MRSA. Some may be at higher risk if they have frequent hospitalizations, frequent use of antibiotics, compromised or broken skin, or lowered immune-system function.

What precautions are used in the hospital?

It is important that additional precautions are taken to reduce the risk of MRSA spreading to other patients in the hospital. These precautions include:

- A sign on the patient's door to inform staff and visitors that precautions are required
- Use of gowns and gloves by all staff who enter the room to provide close care
- The room, and equipment used in the room, is cleaned and disinfected regularly, with some equipment dedicated only to the patient
- A commode for toileting purposes may be designated for the patient's use only

Patients with MRSA are asked not to visit the cafeteria and other public areas of the hospital.

- They may be asked to remain primarily in their rooms, other than for tests or procedures
- In some cases of respiratory illness, patients are required to wear a mask outside the room

Some patients will be offered a body wash and a cream for the nose to treat the MRSA.

- The body wash covers the entire body and is then rinsed off daily for 7 days
- The nose cream is put up the nose twice a day for 7 days
- A week after this treatment is done, the patient is swabbed again, to see if the MRSA has been successfully treated (*if the MRSA is still present, the nurse and patient will discuss further treatment options*)

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What about family and visitors?

Family and friends are encouraged to visit and have close patient contact such as hugging, kissing and handholding, as normal. All visitors must clean their hands before entering and leaving the room.

- Visitors are not required to wear a gown or gloves, unless they are helping the nurse with the patient's care
- Visitors must not assist or visit other patients in the room they are visiting
- Visitors must use public washrooms only, not patient washrooms

How can I help?

Perform hand hygiene:

- **Before:** eating, drinking and entering/leaving a patient room
- **After:** using the bathroom or blowing your nose
- **Before & After:** touching a dressing or wound or applying personal care products

Hand hygiene is:

- Washing with soap and water OR rubbing with an alcohol-based hand sanitizer
- Washing hands when they are visibly soiled
- Turning taps off and opening bathroom doors with a paper towel

Everyone who leaves a patient should perform hand hygiene.

What about future readmissions?

On any future admissions to hospital, additional precautions may be taken - and the patient may be checked again for the presence for MRSA.

Patients should notify other health facilities or providers that they were on precautions for MRSA, in the event similar precautions need to be taken.

What precautions should be used at home?

If a person has MRSA at the time of discharge from hospital, the chance of spreading the bug to others is very small. MRSA is no more infectious than other bacteria that people carry on their skin and are exposed to every day; however, people with MRSA should tell any health-care providers that they were on precautions for MRSA.

People with MRSA can carry on with usual activities, ensuring they wash their hands after going to the bathroom or touching their nose or wound. This practice should be a matter of routine and not just for MRSA. It is good to remind everyone to wash their hands often.

Recommended practices at home:

- Everyone who helps with personal hygiene or toileting should wash their hands afterwards
- Clean hands before the preparation of any food and before eating
- Clean hands well after using the toilet, and encourage family members to do the same
- Do not share personal items that touch the skin such as razors, towels or bar soap
- Clothing may be laundered in the same manner as the rest of the household laundry
- No special cleaning of furniture or dishes in the home is required

Does MRSA go away?

Over time, some people 'decolonize' on their own from MRSA. This is where the bug disappears naturally. People with MRSA should ask their family doctor about re-testing when they are well.