A Guide to MRSA

What is MRSA and what effects does it have?

MRSA stands for Meticillin (formally Methicillin in the UK) resistant Staphylococcus aureus. Staphylococcus aureus is a common bacterium that can live, quite harmlessly, in the nose, throat and sometimes on the skin of healthy people. This is referred to as “colonisation” or carriage. However, Staphylococcus aureus may cause harm (infection) when it has the opportunity to enter the body. This is more likely to happen in people who are already unwell.

*Staphylococcus aureus* can cause abscesses and boils. It can infect wounds (such as leg ulcers or wounds caused by surgery). Occasionally it can cause urine or chest infections. Less commonly it can enter the blood stream and cause septicaemia (blood poisoning). *Staphylococcus aureus* infections are treated with a variety of different antibiotics depending on the type and severity of the infection. Unfortunately, some types of *Staphylococcus aureus* have developed resistance to an antibiotic known as Meticillin and some other antibiotics that are similar to Meticillin. Types of *Staphylococcus aureus* that are resistant to Meticillin are known as MRSA.

How can you tell if someone has MRSA?

Patients who have MRSA colonisation or carriage do not look or feel different from other patients. Taking swabs from body sites such as the nose, throat and perineum can detect MRSA. If infection is suspected, a swab or sample can be sent to the laboratory to check for all types of bacterial infection (including MRSA).

Can MRSA be treated?

Yes, but the choice of antibiotics is limited. If you have symptoms of infection, antibiotics will usually be required, either as tablets or injections. The length and type of treatment will vary from person to person. If you have MRSA “carriage” without signs of infection, treatment will often not be necessary.

Some people will remain “colonised” with MRSA, but live completely normal lives.

How did I get MRSA?

This is often difficult to know. There is evidence that MRSA is increasing. People requiring health or social care in the community, and those who require multiple admissions to hospital are more at risk. In addition you are more likely to acquire MRSA if you have broken skin: e.g. severe eczema or a longstanding wound, or are very unwell and vulnerable to infection generally.

Will MRSA change the way I’m looked after if I have to come into hospital?

In addition to any treatment you may require, there may be a need to take additional swabs or samples to screen for MRSA. If there are other patients nearby who may be at risk of infection, we may move you to a single room to prevent spread of MRSA to other patients. You may continue to mobilise, attend other departments etc., but should avoid direct contact with other patients.

Will I have to stay in hospital longer because of the MRSA?

If you have a severe infection that requires a treatment that could not be administered at home, you may have to stay in hospital longer. If you have a minor infection or are only colonised it is highly unlikely that your length of stay would be affected.
How is it spread?

MRSA is largely spread through direct contact. Hand hygiene is the most important way of preventing spread.

When in hospital

To protect other vulnerable patients, staff will also wear gloves and an apron for procedures that require significant contact, such as assisting you with washing or changing a wound dressing. It is not necessary however, for staff to wear protective clothing if they are simply talking to you, or handing meals or drinks to you. Spread can also occur through indirect contact with equipment, towels, wound dressings etc. If you use a communal bathroom, please inform a member of staff, in order that the bath/shower can be cleaned immediately after use.

At home

If you have community staff involved in your care, they may wear gloves and an apron for procedures that require significant contact, such as assisting you with washing or changing a wound dressing.

Other frequently asked questions

Can I have visitors whilst in hospital?

Yes. We advise that normal social contact does not pose a significant risk to other healthy people, including pregnant women, children and babies. Your visitors will not usually have to wear gloves or aprons. If any of your visitors wish to be involved in your personal care, or if there is a particular concern about risk to a particular person, please discuss with nursing staff if you are in hospital. It is recommended that visitors do not sit on hospital beds and that they clean their hands after visiting.

What happens when I’m at home?

Having MRSA colonisation should not affect your normal daily activities, social life or prevent you going to work. If you have an open wound it should be kept covered with a clean dressing. It is important to wash your hands well before and after touching your wound.

How do I know if I still have MRSA?

Occasionally MRSA can be detected after treatment has been stopped. If you come into hospital again it will be necessary to take additional swabs to check this. When at home, your GP will be able to advise if any additional treatment or swabs are required.

Who needs to know I have MRSA?

Your GP should already be aware, however if you have to attend a hospital for an appointment or admission, please let a member of staff know. This is to protect patients who may be vulnerable to infection. There is no need to tell your dentist, as the standard precautions used will prevent any risk to others.

Will MRSA alter my social life?

MRSA colonisation should not affect or stop you carrying out your normal daily activities, social life or prevent you going to work. MRSA should not affect your sex life.

What can I do to protect other people from MRSA?

We advise that normal social contact does not pose a significant risk to other healthy people, including pregnant women, children and babies. However there are some simple measures that can reduce the risk to others:

- If you have an open wound it should be kept covered with a clean dressing. It is important that you or a carer attending to your wound, wash your/their hands well before and after touching the wound.
- Avoid sharing personal items such as towels, flannels, clothing, razors or toothbrushes. Items of clothing can be washed normally in a washing machine. Those handling used or soiled clothing should always wash their hands after contact.

If you have any questions that we have not answered in this leaflet, please contact one of the Infection Control Nurses on (01392) 402355.