

Acinetobacter baumannii

Brief facts

Acinetobacter baumannii is a bacterium (a “bug”) commonly found in the environment.

Acinetobacter baumannii may be found on the skin of normal healthy people where it causes no problems.

Some *Acinetobacter baumannii* have become resistant to many antibiotics and are known as multi-drug resistant *Acinetobacter baumannii* (MDRAB). It is these bacteria that are of concern in the hospital setting.

MDRAB can cause infection but usually only in very sick patients in hospital, such as those patients in an Intensive Care Unit or with burns or major wounds.

MDRAB is spread by contact with an affected person.

It can also be spread on the hands of staff or by contact with the bacterium in the environment.

Spread can be prevented by everyone washing their hands with soap and water or using alcohol hand gel and by keeping the hospital scrupulously clean.

Patients affected by MDRAB may also need to be kept apart from other patients to prevent it spreading further.

Infections with MDRAB can be treated with antibiotics, although the choice of antibiotics is limited.

About *Acinetobacter baumannii*

Acinetobacter baumannii is a bacterium (a “bug”) that is commonly found in the environment including water and soil. It can also survive in the hospital environment for long periods. There are over 20 different types of *Acinetobacter* and most do not cause infection.

Acinetobacter baumannii is one of the bacteria that may be found on the skin of normal healthy people and it poses very little risk to them.

Multi-drug resistant *Acinetobacter baumannii* (MDRAB)

MDRAB is a type of *Acinetobacter* that has become resistant to many of the antibiotics used for treatment. This means that commonly used antibiotics will not kill the bacteria.

Patients in hospital may have MDRAB present on the body without it causing any harm to them. They would not even know they had it unless they had been tested for it. This is spoken of as being “colonised” with MDRAB.

A small number of vulnerable patients in hospital may become infected with MDRAB. The most common infections include chest (pneumonia), bloodstream (septicaemia), wound and urine infections. The symptoms of infection will depend on where the infection is.

The people most likely to be infected by MDRAB are those who have been admitted to hospital and who are already ill and who often have large wounds.

Testing for MDRAB

- We may test some patients for MDRAB on admission to hospital. Examples are those admitted who are known to have had MDRAB in the past or known to have contact with someone with MDRAB in the past.
- When a patient is found to have MDRAB other patients on the ward may be tested to see if they are carrying the same bug, especially when they are vulnerable and at risk.
- MDRAB may also be found in specimens – blood, sputum, urine or pus – sent to the laboratory from sick patients.

How MDRAB spreads

- It can be spread by contact with an infected person.
- It can be spread on the hands of staff and by contact with contaminated surfaces or objects (including sheets, towels, dressings, sinks).

Preventing the spread of MDRAB

- Scrupulous environmental cleaning is undertaken including ward areas and toilets.
- To prevent it spreading to other vulnerable hospital patients, a patient with MDRAB will be moved to a single room or will be looked after with special precautions on the ward.
- All staff should wash their hands with soap and water or use the alcohol hand gel provided in clinical areas.
- This should be done before and after any contact with a patient.
- Staff will wear long sleeved gowns when caring for a patient with MDRAB.
- Personal items such as towels, face cloths, shavers and hairbrushes **must not be shared**.
- Special care will be taken when the patient is moved to another ward, hospital or clinic.

Treating MDRAB

- Many patients with MDRAB will simply be carrying the bug and will not be infected.
- Infections caused by MDRAB are treatable with a limited number of less commonly used antibiotics. MDRAB does not restrict other medical care that is needed.

Risks for family members, visitors and hospital staff

There is very little risk to family members, pregnant women or children and hospital staff.

Visitors

- Visitors who are themselves unwell should not visit.
- A visitor who has had a recent infection or illness, or has a medical problem which makes them vulnerable to infection, should check with the nurse before visiting.
- Children and babies are vulnerable to infection and visiting may be restricted.
- Visitors should check with the nurse in charge before visiting, especially if the patient has an infection.
- Visitors should wash their hands with soap and water or use the alcohol hand gel provided in clinical areas, before and after any contact with a patient.
- Visitors do not need to wear aprons or gloves unless helping with patient care or visiting other patients on the same day.

Leaving hospital with MDRAB

- When leaving hospital, patients who were found to have MDRAB or who are recovering from an infection, do not need to take the same precautions at home.
- They do not pose an increased health risk to healthy people in the community, including babies and pregnant women.

- However, if a relative or carer is helping to wash or dress a wound, it is important they wash their hands before and afterwards.
- Bed linen and clothes can be washed as usual in a normal washing machine.
- If re-admitted to hospital or admitted to another hospital, please alert staff to the history of MDRAB.

For further information

Please contact the Infection Control Team on:
01392 402355

Or you can go to the following website:

Public Health England

www.gov.uk/government/organisations/public-health-england

This leaflet is based on a patient information leaflet from University College London Hospitals NHS Foundation Trust.

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