**Clostridium difficile**

Information for Patients in Hospital

**What is Clostridium difficile?**

The bowel (gut or digestive tract) of healthy people contains bugs (bacteria) that usually cause no harm. *Clostridium difficile* (also known as *C.difficile* or *C.diff*) is the name of one of the bugs that may be present in small numbers; it can be found in healthy people, about 3% of adults and two-thirds of babies with no symptoms.

Sometimes, *Clostridium difficile* can cause infection. This is usually as a result of taking antibiotics but there are other risk factors such as those indicated below. The antibiotic kills some bacteria in the bowel but *Clostridium difficile* is left behind and can reproduce in large numbers; this allows the toxins they produce to reach levels that irritate the gut lining, causing symptoms of infection.

**What are the symptoms of Clostridium difficile infection?**

- Diarrhoea
- Abdominal cramps
- Loss of appetite
- Fever
- Nausea

**Who is at risk of getting Clostridium difficile?**

- Anyone taking antibiotics. Taking more than one type of antibiotic increases the risk.
- People in hospital, especially elderly patients.
- People with inflammatory bowel disease.
- People who have had surgery on the stomach and/or bowel.
- People being treated for cancer.
- People taking Proton Pump Inhibitors (PPI) for example Omeprazole or Lansoprazole.

**Will I have any tests to confirm Clostridium difficile infection?**

A stool specimen (sample of your diarrhoea) will probably be required. Your doctor or nurse will explain how this is to be obtained. The specimen will then be sent for analysis to confirm whether or not you have *Clostridium difficile* infection.

**How can Clostridium difficile be treated?**

- Where possible any antibiotics you are already taking will be stopped. The *Clostridium difficile* symptoms may then subside without further treatment. However, you may be given an antibiotic specifically to treat the *Clostridium difficile* infection (metronidazole or vancomycin). If so, the doctor prescribing this will instruct you on its use.
- It is very important that you do not become dehydrated. You should therefore continue to drink plenty of fluids to reduce this risk.
- Sometimes, additional treatments are required particularly if you have severe *Clostridium difficile* infection.
How is Clostridium difficile infection spread?

When Clostridium difficile causes diarrhoea it invisibly contaminates the environment, where it can survive for long periods. It can then be picked up on other people’s hands and, via hand to mouth contact, can be transferred into the stomach and bowel.

If I have Clostridium difficile what can I do to prevent spreading it?

- The most important method of preventing spread is to wash your hands carefully with soap and water after you’ve been to the toilet and also before eating.

- It is equally very important that anyone cleans their hands after having contact with you or your immediate environment. Please feel free to ask staff to provide you with hand washing facilities when you need them and also prompt them or anyone else involved in your care to clean their own hands if you think they may have forgotten.

Whilst I’m in hospital will anything be different about my care?

- If you have symptoms of diarrhoea, you may be moved into a single room as soon as possible in order to further reduce the risk of infection to other patients. Alternatively you may be nursed in a bay/small ward with other patients who are similarly affected.

- Staff will wear gloves and aprons when giving you personal care to prevent spread to other patients.

- A specific commode or toilet will be assigned for your personal use to prevent spread to other patients.

- A sign will be placed on your room door to remind everyone who enters your room about the special precautions.

- Assessment of your bowl movements helps to identify how you are improving, a stool chart will be used to record every time you open your bowels, alternatively your nurse may ask you to do this.

- These special precautions will continue until you have had no diarrhoea for 2 days and a return to normal bowel habit.

Will this affect my family and other visitors?

- Family and friends can still visit you, including children and pregnant women. If any of your visitors are at risk (see “Who is at risk?” section), ask a nurse for advice.

- It is not necessary for visitors to wear gloves and aprons. If they are involved in your care, for example helping you to use the toilet, they should wash their hands thoroughly afterwards.

- It is important that all your visitors wash their hands on leaving your room or bed area.

Laundering your personal clothing items

The following information is for relatives/friends washing clothes at home, to handle your personal clothing safely if it is soiled.

- Wash soiled items as soon as possible.

- If a soluble laundry bag has been used for the soiled clothes it can go directly into your washing machine at home, without removing the clothes. The ward staff will advise you.

- Alternately, if an ordinary plastic bag has been used, you will need to remove clothes from the plastic bag and put them into the washing machine, if possible, without sorting them. If you have to sort the clothes, wear rubber gloves.

- Wash the clothing separately from your other home laundry.

- Always hold the clothing away from you when putting them into the washing machine.
Do not shake the clothing.

Launder items according to washing instructions on the care label.

Use normal washing powder or liquid.

After handling the clothing, wash your hands thoroughly with soap and warm water. If rubber gloves have been worn wash these with soap and water first, remove, and then wash your hands.

Clean the area around your washing machine, such as the door of the machine and worktops, with your usual kitchen cleaner.

Tumble dry clothes where possible (following manufactures guidance).

Iron according to manufacturer’s instructions. A hot iron with steam is best, if possible.

What type of follow-up care do I need?

Once the symptoms have stopped and you have taken the full course of any specific antibiotics for *Clostridium difficile* infection, there is no need for follow-up.

There is a possibility that the infection and associated symptoms may return within the first three weeks following treatment. If your symptoms do come back you should contact your doctor. You should **not** take any form of anti-diarrhoeal medication.