

DP02 MRSA – a guide for hospital patients

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If you have any questions or concerns about your care, please contact the nurse in charge at the hospital.

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What is MRSA?

MRSA stands for methicillin-resistant *Staphylococcus aureus*. MRSA is a type of bacterium that can cause hospital infections.

Bacteria are microscopic living organisms. Some are beneficial and some are harmful.

Staphylococcus aureus is a common type of bacterium that can be harmful and is carried in the nasal passage, armpit or groin of 1 in 3 healthy people. Resistance to the antibiotic methicillin, and usually some other antibiotics, means that MRSA infections are more difficult to treat.

MRSA can live on your body without causing any symptoms (colonisation). Colonisation will not cause you any pain or discomfort but MRSA can penetrate into your body (infection) or spread to someone else.

Most MRSA infections are minor skin infections. Sometimes MRSA can cause serious infections such as heart-valve and artificial-implant infections, as well as infections of the blood.

Am I at risk of getting an MRSA infection?

People with a healthy immune system are not usually at risk. If you are unwell or are having a hospital operation or invasive procedure, you have a higher risk.

MRSA is usually spread by physical contact, either directly from the hands of healthcare workers or indirectly from contaminated surfaces and objects.

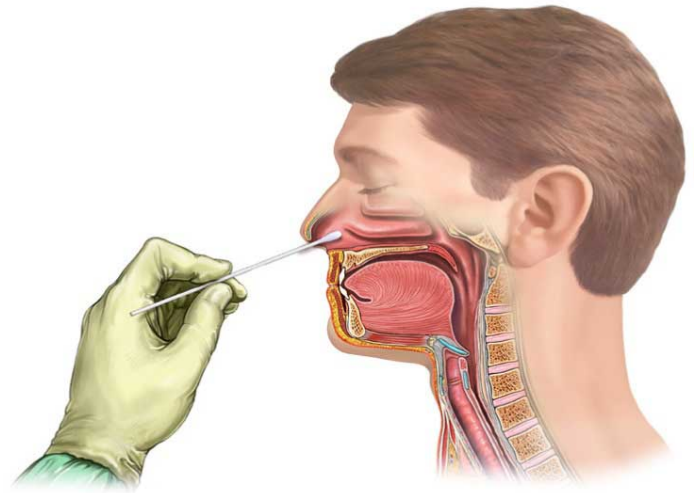
Keeping your hands clean is essential to reduce the spread of MRSA. Wash your hands regularly using soap and water, or alcohol gel.

Check with the healthcare team that they have washed their hands before treating you. Do not touch any areas of broken skin or wound dressings.

How do you know if I have MRSA?

Most people admitted to hospital are screened to find out if they are colonised with MRSA. MRSA screening happens either before you arrive or within 1 to 2 days. You may also be screened again during your hospital stay.

Screening usually involves the healthcare team taking a nasal swab (using cotton wool to take a sample from the surface of your nasal passage). Sometimes the sample is taken from your armpit or groin. The sample will be sent to the laboratory for analysis.



Taking a sample from the nasal passage

If the healthcare team is concerned that you may have an MRSA infection, they will take a swab from the site that is thought to be infected. If you do have an infection, the results will be used to decide the most effective antibiotic treatment.

What treatment will I need if I have MRSA?

If you are colonised with MRSA, you may be placed in isolation away from other people. You may also need to have an ointment in your nasal passage 2 to 3 times a day to remove MRSA from this area, or you may need to wash using medicated bodywash and shampoo. If you are found to be colonised with MRSA before you are admitted to hospital, you may have this treatment at home.

If you are infected with MRSA, you will usually be placed in isolation away from other people and given antibiotics to treat the infection. You may be cared for in an area with other people who also have MRSA.

The type of antibiotics that is used to treat your infection will depend on where you are infected and which antibiotics the MRSA is sensitive to.

You may need surgery to remove infected tissue or any artificial implants.

Can my visitors get MRSA?

MRSA does not usually cause infections in healthy people, so visitors have a low risk of MRSA infection, even if you are infected or colonised. However, ask your visitors to wash their hands before and after touching you or surfaces or objects near you.

What happens after I go home?

Even if you were treated for MRSA during your stay in hospital, you may continue to be colonised after you return home. However, the risk of spreading MRSA to other healthy people is low.

Continue keeping your hands clean and use local antiseptic cream and dressings on minor cuts. If you get a high temperature or feel unwell, notice pus in a wound, or if a wound becomes red, sore or painful, contact your GP.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Acknowledgements

Reviewer

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Illustrator

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