

## Will I need to go to hospital?

Most patients who are colonised with MRSA do not usually have to be admitted to hospital. This can be managed by your GP in your nursing or care home. The local infection prevention and control team will also be aware of patients who have MRSA. Hospital admissions are only required for the more serious infections.

## Will I need treatment for MRSA?

MRSA is not confined to hospitals. Outside hospitals, people may carry MRSA without it causing harm to themselves or others. These people are said to be colonised with MRSA.

Your GP may prescribe treatment if you are colonised with MRSA, particularly if you are likely to be admitted to hospital. You should ask any visitors to your home to make sure they wash their hands on arrival and departure.

Good hygiene can assist in reducing the spread of MRSA and many other infections. The single most important measure in reducing cross-infection is the thorough washing and drying of hands between caring for people, and whenever necessary.

## Where can I get more information?

Information on MRSA infections in England and Wales is available on the Infectious Disease section of the Health Protection Agency website [www.hpa.org.uk](http://www.hpa.org.uk).

## Reducing the Risks

Research has shown that some organisms are now resistant to certain antibiotics. MRSA is an example of a resistant organism. In response to this, local GPs are provided with guidance on which types of antibiotics can be prescribed.

There are also ways you can help reduce the risks:

**Antibiotics** - Take responsibility when you are prescribed antibiotics - always ensure you complete the prescribed course

**Alternative treatment** - Be aware that not all illnesses, such as viral infections, can be treated by antibiotics

**Handwashing** - If you are visiting patients with MRSA in their own home, please ensure that you wash your hands, particularly on departure

Do not be afraid to ask anyone else if they have washed their hands.

## Infection control is everyone's business

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## MRSA

Information for patients, visitors and staff in care homes



## What is MRSA?

MRSA stands for Meticillin Resistant Staphylococcus Aureus. It is a variety of a common germ called Staphylococcus Aureus.

Staphylococcus Aureus (S Aureus) lives completely harmlessly on the skin and in the nose of about one third of the population. It is more common on skin that is broken - if you have a cut, a sore, or a rash such as eczema.

## How can MRSA affect me?

Most people who have MRSA are described as being colonised. This means that MRSA is present in the nose and skin but is not harmful to that person's health. People who are colonised have no signs or symptoms of infection and feel fine.

MRSA can cause problems, however, when it gets the opportunity to enter the body. This is more likely to happen to people who are already unwell.

MRSA causes abscesses and boils, and it can infect existing wounds. These may be accidental wounds such as grazes or deliberate wounds such as those made for a drip or during surgery. These are called local infections. They may then spread into the body and cause serious infections such as septicaemia (infection of the blood).

MRSA is resistant to flucloxacillin (a type of penicillin) and some of the other drugs that are commonly used to treat infections.

## How can you tell if someone has MRSA?

Patients who have MRSA do not look or feel different from other patients. Your nurse or GP takes swabs from your skin or nose, or takes samples of urine or sputum and these are sent to a laboratory. If the laboratory grows MRSA, it carries out further tests. The GP uses the results of these tests to decide which drugs are used to treat you.

## How did I get MRSA?

MRSA can be acquired in the community or in hospital, but sometimes as a result of receiving health or social care.

## What treatment will I have?

Your nurse or GP will take swabs to check if the MRSA is confined to one or two parts of your body or if it is widespread. Your GP will be informed and will prescribe treatment. The treatment depends on how widespread the MRSA is.

If you have MRSA on your skin, hair or nose, you may be given the following treatments:

- antiseptic body and hair shampoo
- antibiotic cream for your nose

The treatment is known as decolonisation. It is a five day course of treatment. You will then have two days without treatment before you are re-screened on the eighth day. Your GP will then prescribe further courses of treatment if necessary.

You will not need to be separated from the other residents during treatment as long as any open wounds are covered with an appropriate dressing.

If you have a local infection such as an infected wound, or if you have a serious infection, you may be treated with antibiotics to kill the MRSA. If you are admitted to hospital you may be nursed in a single room in order to prevent MRSA spreading to other patients.

MRSA affects the way we look after patients in nursing or residential homes. We also take steps to prevent MRSA spreading to other residents.

## Can I still have visitors?

MRSA does not usually affect healthy people, including pregnant women, children and babies. MRSA can affect people who have certain long-term health problems.

Your visitors should be asked to wash their hands before and after visiting you so that they do not spread MRSA to other people who are susceptible.

Please do not be afraid to ask care staff if they have washed their hands before they carry out any treatment.