

Good hand hygiene is the most important way to prevent the spread of *Multi-drug resistant gram-negative bacteria*. Posters showing the best way to wash your hands are available at the hand wash sinks.

What happens if I am admitted to a hospital again in the future?

You may be given a single room and screening swabs may be taken and sent to the laboratory. If these swabs are found to be clear you may be moved into the general ward where you can mix freely with other patients.

Infection prevention and control is everyone's responsibility.

Patients and visitors all have an important role to play in preventing the spread of healthcare associated infections.

If you require further advice or information, please contact the Trust's Infection Prevention and Control Team or a member of the ward/department staff.



INFECTION PREVENTION AND CONTROL

**Proud to be clean,
it's everyone's business!**

Multi-Drug Resistant Gram Negative Bacteria (MDR-GNB)

*Information for patients
and carers*

What are Multi-Drug resistant gram-negative bacteria (MDR-GNB)?

Bacteria or germs are found on everyone, both inside and outside the body. Gram-negative bacteria are germs that are often found living naturally in the human gut. For many reasons a small number of these bacteria can become resistant to the antibiotics that they may have been sensitive to in the past. This may mean that some of the traditional antibiotics are no longer effective for treating infections caused by these germs.

'Multi-drug resistant Gram-negative bacteria' is a term covering many different bacteria, including Escherichia coli (ESBL) and many others. It does not include MRSA. (Sometimes they are referred to as Extended-spectrum Beta lactamases which is shortened to ESBL).

How did I get it?

Gram-negative bacteria can be passed from person-to-person directly or indirectly via contamination of hands or objects and can then be introduced into the mouth, wounds or other entry sites into the body. They can also be acquired from another part of your own body. Currently this is found most often in the long-term care or in the critical care settings. The problem is usually first identified, however, when an individual presents to hospital and a specimen of urine, blood or a wound swab is submitted to the microbiology lab to be tested.

Do these germs always cause infection?

No, people can often carry the bacteria without causing any harm (called 'colonisation') but sometimes may lead to infection.

What infections do MDR-GNB cause?

Most commonly Multi-drug resistant Gram-negative bacteria are detected in the urine. However they may also be found in other sites such as respiratory tract and wounds.

How can the spread of these bacteria be prevented?

People in hospital are more at risk of infections because their body defences are weakened by illness, surgery, medication and the presence of invasive devices like 'drips' and urinary catheters.

Patients with positive sputum samples who are coughing and patients with exfoliative skin conditions and positive wound swabs have the greatest risk of spreading the infection. Patients with Multi-drug resistant Gram-negative bacteria are usually transferred to a single room. Healthcare staff involved in direct care will wear gloves and a plastic apron whilst in the room to reduce the risk of transferring bacteria to other patients.

The prevention of spread of the bacteria relies mainly on everyone having good hand hygiene practices, particularly after using the toilet or caring for wounds or devices such as urinary catheters. Your room will be cleaned daily and any equipment that is used on multiple patients will be cleaned after each use.

Can it be treated?

People who are simply colonised (have no symptoms of infection) with the bacteria do not require antibiotic treatment. In most people these antibiotic resistant bacteria will disappear on their own over time. However, despite being resistant to many of the usual antibiotics, be reassured that treatment options are still available if an infection should occur.

Will I have to stay in hospital?

People may not have to stay in hospital until the infection is cleared up. You will be able to go home when your general condition allows regardless of whether you are still carrying the bacteria or not.

Can I have visitors?

It is very unlikely that visitors or relatives will be affected. However all visitors should use the sanitizing gel on entering and leaving the ward. Visitors should not sit on the bed and should not visit if they are unwell or have diarrhoea or vomiting. You should make sure that you wash your hands before eating and after using the toilet. Visitors should not go and visit any other patients on the ward (unless they speak to a staff nurse first).

What about my laundry?

Personal laundry should be bagged and kept in your room for relatives/friends to collect as soon as possible. Items should be washed separately from the rest of your families laundry in the usual way with normal detergents ideally on a hot wash (60°C or above if the material will withstand the temperature). Hands must be washed with soap and water after handling your personal soiled linen.

What happens when I go home?

The presence of the bacteria (which may disappear quite naturally) should not affect you or your family at home. Usual personal hygiene and household cleaning is sufficient and there are no restrictions to activities or visitors. If you have a wound and it becomes red, swollen or oozes, or if you develop a fever then please contact your GP as usual. Your GP will be informed via your discharge documentation of the type of infection / colonisation you have had.

