



## Clostridium difficile

**Infection Control** 



A guide for patients and visitors

## **Contents**

Information	1
Symptoms	1
Diagnosis	2
Treatment	2
Infection prevention and control measures	4
Hand hygiene	5
Frequently asked questions	5
Other sources of information	7



This information is for patients or for families and visitors who would like to know more about Clostridium difficile.

This leaflet will answer some of the questions that patients frequently ask about Clostridium difficile and will explain ways to treat the infection and prevent it from spreading.

Clostridium difficile (sometimes known as C.diff) is the name of a type of bacterium (germ) which sometimes lives in the bowel (gut). Under normal circumstances C. diff does not cause illness as it is kept in check by all the other bacteria that live in the bowel.

Clostridium difficile infection most commonly occurs in people who have had antibiotics to treat another infection, for example a chest infection or a bladder infection. Most cases of Clostridium difficile infection affect those patients who are elderly and/or debilitated and will occur during the first week of antibiotic therapy. However, symptoms can begin after a single dose of antibiotics or may be delayed for as long as 6 -10 weeks after treatment.

## **Symptoms**

Clostridium difficile can produce chemicals (toxins) which are released into the bowel and it is these chemicals which cause the symptoms.

Symptoms can be mild or severe and can include:

- Watery diarrhoea
- Abdominal cramps or pain
- High temperature

Although most patients do recover completely, the infection may be very debilitating for some as diarrhoea can last for some time. On very rare occasions, the infection may damage the lining of the bowel, causing very bloody diarrhoea. This complication can become life threatening.

## Diagnosis

Diarrhoea can be due to many different causes, but doctors and nurses will often suspect Clostridium difficile infection in anyone who has diarrhoea that develops within a couple of months of taking antibiotics or when someone has recently been in hospital. The only way to know that Clostridium difficile is implicated in a person's diarrhoea is for the laboratory to detect it in stool (faeces) samples.

#### **Treatment**

There are different strains of Clostridium difficile and some can cause more serious infections than others. When diarrhoea develops during a course of antibiotic treatment, just stopping the antibiotics can sometimes allow the 'normal' bowel germs to thrive again and stop the symptoms. In other cases, different antibiotics that are



known to kill Clostridium difficile may be needed to treat the infection. Occasionally, more than one course of treatment is required.

In addition to the normal reviews from medical and nursing teams, all patients with Clostridium difficile infection are closely monitored by the Infection Prevention and Control Team. The patient's treatment and condition are discussed at least weekly by a specialist doctor, pharmacist and nurses to ensure that the Clostridium difficile treatment is working well.

It is also important to try to prevent and treat any complications of diarrhoea.

#### Complications can be:

- Dehydration so it is important to make sure that people with Clostridium difficile infection are encouraged to drink plenty of water.
- Sore skin on your bottom so it is important for anyone with diarrhoea to try to keep their bottom clean for example by using wet wipes after diarrhoea and use of barrier creams also changing clothing daily or as soon as it becomes soiled.

If you are a patient, it is important to tell the doctors or nurses whenever you have had diarrhoea or if you notice that your skin is becoming sore or you are unable to drink enough fluids.

## Infection prevention and control measures

Unfortunately, Clostridium difficile can produce spores (like seeds) which are passed into the environment when patients with Clostridium difficile have diarrhoea. The spores are able to survive extremely well in the environment especially in dust, on bed sheets, curtains and other surfaces. It is important for patients to have high standards of hand hygiene and to change their clothing daily or sooner if it becomes soiled.

People who are not on antibiotics are not usually at risk from the illness, but hospital staff will follow these simple steps to help to minimise the risk of spread:

- Changing bed linen daily, sooner if it becomes soiled
- Cleaning the environment and equipment with a special type of disinfectant
- People with diarrhoea will be cared for in a side room and will use their own toilet or commode whenever possible
- Hospital staff will also use gloves and aprons when providing close personal care for patients

Visitors do not need to wear gloves and aprons but they must use the hand hygiene rub before visiting anyone in hospital and should wash their hands with soap and water after visiting. This protects patients and prevents the spread of infections to others.

After patients have gone home, the room is cleaned as normal and then 'fogged' with a special type of disinfectant mist.



## Hand hygiene

Hand rub does not kill this type of bacteria, so hands must be washed with soap and water to remove the Clostridium difficile spores. Thorough hand washing using soap and water is always important but especially after using the toilet; after helping someone else to use the toilet; before serving food or eating and after cleaning the environment.

Hand hygiene is important for patients and visitors as well as for hospital staff. Many of our wall mounted hand rub and soap dispensers are automatic and there is no need to touch them. Simply place your cupped hands underneath the dispenser and the correct amount will be dispensed onto your hands. For manual pump dispensers, just dispense one measured amount and use to cleanse your hands.

## Frequently asked questions

#### Can Clostridium difficile come back?

Sometimes, the diarrhoea can come back again and it may be necessary to give a longer course of treatment. Further courses of antibiotics may cause the symptoms to return, so it is important to tell your doctor and nurse if you have ever been told that you have had Clostridium difficile infection.

#### How will I know when the Clostridium difficile is gone?

When the diarrhoea stops and your normal bowel habits return, we consider the infection has gone. There is no need to send a further specimen to check, but you will still need to finish your course of antibiotics.

#### Is there a risk to my family?

Clostridium difficile can affect people who have certain long-term health problems, so if you have specific concerns about visitors, please discuss it with the staff looking after you. Generally, you can continue to have normal social contact such as shaking hands or kissing with your friends and family.

Some people are worried about asking family and friends to take soiled or used clothing home to wash. Special laundry bags are available on request from your ward nurse. Relatives/carers can put the bags straight into the washing machine and they will only open once the wash cycle has begun. Clostridium difficile germs are removed with detergent and water at normal washing temperatures.

#### Can I go home with Clostridium difficile?

You would normally wait until the diarrhoea has settled and your medical team is satisfied that you are fit for discharge. You may need to continue treatment at home and we will give you advice about what to do if you become unwell. You may also be given a special notification card that you should show to any



health care professional in a medical setting, e.g. doctors, dentist or pharmacist; this is especially important if they are prescribing antibiotics.

#### Who can I speak to if I have further questions?

Please speak to any of the ward staff who are caring for you.

The Infection Prevention and Control team will listen confidentially to any comments and complaints so that we can learn from any mistakes and improve still further. You may write to us at the address below or if you would like to speak to an infection control nurse you can contact us directly or your ward nurse can arrange a meeting.

# Infection Prevention and Control Nurses The Clatterbridge Cancer Centre NHS Foundation Trust Clatterbridge Road, Bebington, Wirral, CH63 4JY Telephone 0151 556 5726

#### Other sources of information

Ward staff will be able to provide you with leaflets regarding specific infections and generic infection prevention and control.

#### **Official Websites**

Public Health England display information about many different infections. You can access this information using the A-Z function on their website at: www.gov.uk/government/organisations/public-health-england.

Notes	



Notes	

### How we produce our information

All of our leaflets are produced by staff at The Clatterbridge Cancer Centre and this information is not sponsored or influenced in any way. Every effort is made to ensure that the information included in this leaflet is accurate and complete and we hope that it will add to any professional advice you have had. All our leaflets are evidence based where appropriate and they are regularly reviewed and updated. If you are concerned about your health in any way, you should consult your healthcare team.

We rely on a number of sources to gather evidence for our information. All of our information is in line with accepted national or international guidelines where possible. Where no guidelines exist, we rely on other reliable sources such as systematic reviews, published clinical trials data or a consensus review of experts. We also use medical textbooks, journals and government publications.

References for this leaflet can be obtained by telephoning 0151 556 5570.

If you need this leaflet in large print, Braille, audio or different language, please call 0151 556 5570.

If you have a comment, concern, compliment or complaint, please call 0151 556 5203.

The Clatterbridge Cancer Centre NHS Foundation Trust Clatterbridge Road, Bebington, Wirral, CH63 4JY.

Tel: 0151 556 5000

Web: www.clatterbridgecc.nhs.uk

Issue date: 01/12/18

Issue no: 5.0

Reference: LICMCDIF Review date: 01/12/21