Special points to remember:

- **Half of all people carry staph bacteria around on their bodies—*without getting sick from it*. But, if you have staph on your skin and it "jumps" onto your clients, they might get very sick.**
- **When working with a client who has MRSA, you should wash your hands and put on gloves *before* entering the client's room.**
- **Clients who are infected with MRSA usually need to be in a room of their own.**

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Good hygiene is the #1 way to prevent the spread of MRSA.

MRSA Fact Sheet

Just for You from In the Know!

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WHAT IS MRSA?

Methicillin **R**esistant **S**taphylococcus **A**ureus (or MRSA, for short) is a bacteria that has learned how to fight back against antibiotics in the penicillin "family". Staphylococcus Aureus—usually just called "staph"—is commonly found in the noses and on the skin of healthy people. It is usually a harmless "passenger", but when it turns toxic, it causes minor illnesses (like pimples and boils) or serious illnesses (like pneumonia and toxic shock syndrome).

The antibiotic, methicillin, has been used for years to treat staph infections and is still successful in some cases. However, MRSA germs are staph bacteria that have become "super bugs". They are *drug-resistant*!

Until recently, MRSA was rare, causing less than 1% of all staph infections seen in the hospital. Today, things have changed dramatically. The latest research found that of all the staph infections among intensive care patients, 65% of them are caused by MRSA.

The *vast majority* of MRSA infections occur among patients in hospitals and other healthcare settings. However, you've probably seen in the news that MRSA is becoming more common in community settings—like schools, military housing, prisons and athletic locker rooms. This is because MRSA thrives in crowded areas where there is a good chance of skin-to-skin contact.

WHO GETS MRSA?

In healthcare workplaces, MRSA germs tend to live on the patients. Elderly and/or very sick people are most at risk for MRSA. If they have an open wound (such as a bedsore) or a tube going into the body (like a Foley catheter), their risk is even higher.

In addition, MRSA attacks people with compromised immune systems—such as people with AIDS.

Infection control experts believe that over 1 million hospital patients were infected with MRSA in 2006.

People can also be "colonized" with MRSA, meaning that they carry the MRSA germs on their body *without any signs of infection*. Doctors estimate that over 400,000 Americans were colonized with MRSA in the last year alone!

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An MRSA Fact Sheet

Created especially for you by:

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HOW IS MRSA SPREAD...AND CAN IT BE TREATED?

MRSA germs can be found on the skin, in the nose and in the blood or urine. Most commonly, the bacteria are spread between people through *physical contact*. In healthcare facilities, it is usually healthcare workers who spread the germs from patient to patient on their hands, clothing or instruments.

While MRSA bacteria do not travel through the air, they can live for days on personal items such as towels, washcloths, razors, clothing or uniforms—anything that has had contact with MRSA infected skin or body fluids.

The good news is that most MRSA infections are treatable with powerful antibiotics. The treatment may be in the form of a pill, an IV or a topical antibiotic cream. The most important part of treatment for an MRSA infection is that people *follow the directions* for taking the antibiotic—and don't stop taking it just because they are feeling better or it looks like their infection is gone. That's one of the reasons that staph bacteria became drug-resistant in the first place!

Here's the deal: antibiotics kill enough bacteria to control a person's infection, beginning with the *weakest* germs. Because no antibiotic can destroy every harmful germ in someone's body, there are always some bacteria left. (This is *especially* true if the person stops taking the antibiotic before the prescription is finished.) The strongest germs survive and teach themselves how to fight the antibiotic.

So, when a doctor prescribes antibiotics for MRSA infections, it is vital that people take *all* the doses. They should not share their antibiotic with others or "save" some of the doses to use at a later time.

In addition to medication, some MRSA infections may need to be cut open and drained by a physician. Some MRSA infections may return after being treated. If this happens, people should seek medical attention.

WHAT CAN YOU DO TO PREVENT MRSA?

Remember...MRSA is most often spread by human hands—especially healthcare workers' hands. Your hands may become contaminated with MRSA bacteria by touching people who are either *infected* or *colonized* with the germ. If you don't wash your hands properly with soap and water (or use an alcohol-based hand sanitizer), the bacteria can be spread when you touch other clients. To reduce the spread of MRSA in your workplace, the Centers for Disease Control (the CDC) recommends that you:

- Wash your hands between every patient contact.
- Wear gloves and disposable gowns when working with patients who have staph infections.
- Disinfect stethoscopes, blood pressure cuffs and other patient equipment after each use.
- Move patients who have been diagnosed with MRSA into private rooms.
- Follow any other infection control policies for your workplace.

It is easier to prevent staph infections than it is to treat them.

To reduce the spread of MRSA in community settings, you can:

- Wash your hands regularly with soap and water.
- Avoid touching other people's wounds.
- Avoid sharing personal items like razors and towels.
- Use antibiotics only when necessary.