



Information for patients about MRSA and the staph aureus bug

What is MRSA?

MRSA stands for Methicillin Resistant *Staphylococcus Aureus* – MRSA for short. It is a type of bacteria (bug) that is resistant to antibiotics. These bacteria are sometimes called ‘superbugs’. *Staphylococcus aureus* is sometimes called ‘staph aureus’ for short (the word ‘staph’ is pronounced like staff). We will refer to it as staph in this leaflet, MRSA is a type of staph that is more difficult to kill.

Ordinary staph is a common bug. At any time, about 1 in 3 people carry staph on their skin or nose. For most people most of the time, it stays on the skin or the inside of the nose and it’s harmless. This is called ‘carrying’ staph or being ‘colonised’ with staph – it’s on your body, but it’s not making you sick.

However, if staph gets under the skin it can cause infection. If you ever had a bad pimple or boil, an infected ingrown toe nail or an infected cut, it was probably caused by staph getting under your skin. Staph can also cause very serious infections like cellulitis (infection of inner skin), pneumonia, wound infection and septicaemia (blood poisoning). These kinds of infections are more common in people who are already sick or have had a lot of medical or surgical treatment.

When staph causes infection, antibiotic treatment is sometimes needed to kill the bug. The antibiotic that is most often used to treat staph infection is called flucloxacillin. MRSA is a type of staph that flucloxacillin does not kill because it is antibiotic resistant. MRSA is no more likely to make someone sick than any other staph. The problem with MRSA is that when it does make someone sick, doctors have to use different antibiotics to treat the infection.

How could I get MRSA?

Staph, including MRSA, falls off the skin and nose of people who carry it. This happens all the time so that staph is often found on surfaces, towels, sinks, on hands and in food. People pick up staph all the time in everyday contact with other people and things that people use. The bug spreads to new people when they touch something with staph on it.

Twenty to thirty years ago, MRSA was almost always a hospital superbug and was very rare in people who were never in hospital. This has changed, although people who spend a lot of time in hospital or in nursing homes still have a greater chance of carrying MRSA. MRSA is now so common that even people who have no contact with hospitals or nursing homes sometimes carry



MRSA. In some countries, there are types of MRSA that spread mostly in the community – for example, in sports clubs.

How do I know if I have MRSA?

You will only know if you have MRSA if it is found in a lab test. Many people coming into hospital have a 'swab' taken from their nose or their skin to check if they are carrying MRSA. This is a simple procedure where the swab – which is like a cotton bud – is rubbed up your nose or on your skin to take a sample.

What happens if I have MRSA in hospital?

Hospitals try to stop MRSA spreading because many people in hospital are already very sick and vulnerable. If very vulnerable people get an MRSA infection, it can be hard to treat because the usual antibiotics do not work very well. Doctors have to use special antibiotics.

If you have MRSA, you may be cared for in a single room. Hospital staff looking after you will be very careful to clean their hands after they care for you, and they may wear aprons and gloves when doing certain tasks. Sometimes, you will be prescribed medication such as washing lotions, creams, ointment or powder to get rid of the MRSA. These steps are taken to protect you and other patients who may be seriously ill and unable to cope with another infection.

How can I help to stop the spread of MRSA?

Cleaning your hands thoroughly is the best way to help stop the spread of almost any bug, including MRSA. Hands should be cleaned before and after changing any dressing on a wound or handling any drips or tubes that enter the body. If you have MRSA, you can help the hospital staff if you remind them to clean their hands after they care for you. If you know you have MRSA, it is best to have very little contact with other patients when you are in hospital, and it is best not to share newspapers or other things with other patients. A single room for people with MRSA makes it easier to limit contact with other patients.

What happens when I go home?

MRSA is a low risk for people who are generally well and not in hospital. When you leave hospital, you can have a normal family and social life. You are not a big risk to other people. The MRSA may go away over time – especially if you do not need to take antibiotics for any reason. Usually, it is not necessary to try to clear the MRSA with lotions and creams after you have gone home. Some



people will want to try to clear the MRSA because they do not feel comfortable knowing that they have MRSA.

There is a small number of people who carry MRSA who seem to be very vulnerable to it and keep getting infections. For those people, it is sometimes necessary to follow a course of treatment with lotions and creams to clear up the MRSA.

If you have MRSA and you have to visit your doctor, or if you are re-admitted to hospital, you should let them know that you had MRSA in the past. This will ensure you get the correct treatment.

If you are a healthcare worker and have an MRSA infection, you should contact the Occupational Health Department for advice.

If your child has MRSA, they can attend nursery and go to school as normal.

In everyday life you do not have to tell people that your or your child carry MRSA.

Further information

For further information and videos on hand hygiene are on www.hse.ie/infectioncontrol and information on MRSA is available on www.hpsc.ie

This information is approved for use by the HSE's Antimicrobial Resistance and Infection Control national programme. Text awarded Plain English mark from the National Adult Literacy Agency

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