

## WHAT IS CLOSTRIDIUM DIFFICILE?

Clostridium Difficile (C.difficile) is a spore-forming bacterium which is present as one of the normal bacteria found in the gut of up to 3% of all healthy adults. People over the age of 65 are more susceptible to developing this illness due to these bacteria.

C.difficile diarrhoea occurs when the normal gut flora is altered, allowing C. difficile bacteria to flourish and produce a toxin that causes watery diarrhoea. Procedures such as enemas, gut surgery and drugs such as antibiotics and laxatives cause disruption of the normal gut bacteria and therefore increase the risk of developing C.difficile diarrhoea

## WHAT ARE THE SYMPTOMS OF C. DIFFICILE INFECTION?

The effects of C.difficile can vary from mild to severe diarrhoea and, much more unusually, to severe inflammation of the bowel.

## HOW DO YOU CATCH IT?

It is possible for the infection to spread from person to person because people suffering from C difficile associated disease shed spores in their faeces. Spores can survive for a very long time in the environment and can be transported on the hands of people who have direct contact with infected patients or with

environmental surfaces (floors, bedpans, toilets ect.) contaminated with C. difficile.

## WHO DOES IT AFFECT? Are some people more at risk?

The elderly are most at risk; over 80% of cases are reported in the over 65 age group. Patients with a weak immune system are also at risk. Children under the age of 2 years are not usually affected.

## HOW DO DOCTORS DIAGNOSE C.difficile INFECTION?

It is difficult to diagnose C.difficile infection on the basis of symptoms alone. The infection is normally diagnosed by carrying out laboratory testing which shows the presence of the C. difficile toxins in the patient's faecal sample. A sample of faeces has to be sent to the microbiology laboratory. The test result is usually available within 1-2 days.

## HOW CAN C.difficile BE TREATED?

C.difficile can be treated with a specific antibiotic such as Metronidazole. There is a risk of relapse in 20-30% of patients, and other treatments may be tried, including pro-biotic (good bacteria) treatments, with the aim of restabilising the balance of flora in the gut. Most cases of C.difficile make a full recovery; however elderly patients with other underlying conditions may have more severe illness. Occasionally,

infection in these circumstances may be life threatening.

## WHAT ACTION SHOULD BE TAKEN IF SOMEONE CONTRACTS OR COMES IN CLOSE CONTACT WITH C .DIFFICILE?

**For patients** – prior to coming into Benenden Hospital for a procedure we ask you contact the Infection Control Team if you suspect you are ill. They will advise you to take a stool sample to your GP to be tested. We will require a report to say that it is negative before you will be admitted.

**For Visitors** – We ask you not to visit the hospital if you are suffering with diarrhoea, and to contact the Infection Control Team.

**For Staff** – We would ask you not to come to work and to contact either the Occupational Health Department or one of the infection control nurses before returning to work.

## PREVENTION AND CONTROL

Important components to the prevention and control of C difficile are:

- Prudent antibiotic prescribing to reduce the use of broad spectrum antibiotics
- Isolation of patients with C.difficile and good infection control nursing.
- Hand Washing (not relying solely on alcohol gel as this does not kill the spores)

- Wearing gloves and aprons, especially when dealing with bed pans etc.
- Enhanced environmental cleaning and use of a chlorine containing disinfectant where there are cases of C. difficile disease to reduce environmental contamination with the spores.

### **WHAT IS Benenden doing to reduce the risk of C. difficile?**

- It is particularly important for patients, visitors and staff to use good hygiene practices while they are in the hospital. This includes correct hand hygiene.
- The hand gel is provided at the entrance of the hospital and all the wards and departments. However soap and water is the preferred method to wash your hands to reduce the risk of C difficile.
- We ask staff, patients and visitors after using the toilet to wash their hands thoroughly with soap and water.
- We ask visitors not to touch the patients' dressing or intravenous line or catheters.
- We ask visitors not to give patients cooked food without asking a member of the nursing staff.

### **The Infection Control team are:-**

Heather Leslie, Lead Infection Prevention & Control Practitioner

### **There are Infection Control link Practitioners in all clinical areas.**

#### **Point of contact**

If you have any problems or concerns please contact either your GP or the Infection Control Team on 01580 240333 Ex 7286 or Ex 7043

#### **Further information and support**

NHS Direct  
Tel 08454647

Issued by Heather Leslie Infection Control

Approved by: The Director of Infection Prevention & Control

Issue date: January 2009

Review date: October 2021

Reviewed & Re-issued: Heather Leslie, Infection Control. September 2018



## **Infection Control**

### **Information for patients, visitors and staff about**

### **Clostridium Difficile**

**Form ref 1009/2018**