

This information is for patients, relatives and carers. It explains what MRSA is, how it affects us, how it spreads and what we can do to stop it spreading.

## Who has bacteria?

It is normal for healthy people to have bacteria (germs) on their skin. One of the most common types of bacteria is Staphylococcus aureus. One in three people have this bacterium in their noses or skin, without it causing any harm. A small percentage of these people carry a resistant type of Staphylococcus aureus which is known as MRSA.

Most people with MRSA carry it without any harm to themselves or their family. However, it sometimes causes infections, especially if it gets into a wound. This is why we try to stop MRSA spreading around the hospital.

## What is MRSA?

MRSA stands for meticillin resistant Staphylococcus aureus. This means that meticillin (an antibiotic) does not work on this type of bacteria. Therefore infections with MRSA can be harder to treat with certain antibiotics. However, the majority of patients who develop an MRSA infection are successfully treated with different antibiotics.

## How does MRSA spread?

MRSA is carried on our hands and mainly spreads when we touch other people or things, such as equipment or clothing. It can also travel through the air if people have MRSA in their sputum (phlegm) or on skin scales (dry skin). Please feel free to ask staff if they have cleaned their hands before commencing your treatment / care.

## Where did I get MRSA?

For some people MRSA can be part of their normal body bacteria. Others many have been colonised (lives on skin

but not infection) with MRSA before coming into hospital or during the hospital stay. Most patients found to have MRSA acquired the bacteria before admission either in the community or while in another hospital or nursing home.

**MRSA DOES NOT put you at risk if you are a healthy person, pregnant woman or child, providing you follow the basic rules of hygiene and always wash your hands.**

## Can I have visitors?

Yes. Your visitors will be asked to report to the nurse in charge before visiting and to wash their hands as they come and go either with soap and water or alcohol hand rub. They do not need to put on gloves or an apron unless they are visiting another patient afterwards or helping with personal care.

We ask people who are unwell to stay away until they are better (e.g. if taking antibiotics or have an upset stomach, heavy cold or chest infection). If you are in doubt, you should discuss this with the staff looking after you.

Visitors should never touch a wound or device (such as a drip or catheter) or sit on your bed and they may only use public toilets.

## If I have MRSA how will you look after me?

If you have MRSA, the nurses will care for you using additional precautions, such as gloves and aprons.

You may also be isolated, which means looking after you in a side room or separate bay. To do this, it might be necessary to move you to another ward.

Hand washing is also vitally important to prevent the spread to others.

## How is it treated?

We might give you a special cream for your nostrils and body washes to get rid of the bacteria if appropriate. We might also give you antibiotics if you have an infection as a result of having MRSA. We will need to keep doing tests to find out if you still have MRSA. We do this by taking swabs from different sites on your body.

## Can my washing be sent home?

Yes, laundry can still be taken home and washed as usual. Wash soiled laundry on a separate cycle and at 60°C if the fabric will withstand the temperature.

## Will any treatment be delayed?

If you have MRSA it is unlikely that you will be prevented from having treatment and tests such as x-rays, operations and physiotherapy. However, cancellation may occasionally be necessary to reduce any risks to your health.

## Can I go home with MRSA?

If you are otherwise well enough, your going home date will not be delayed even if you are still carrying MRSA on your body. MRSA is not a danger to healthy family, friends or the general public, so there are no special precautions.

When you go home you should:

- continue to wash your hands with soap and water
- carry out your personal hygiene regularly but do not share towels and face cloths
- advise your family to wash their hands with soap and water if they have helped care for you
- clean surfaces in the bathrooms and toilets after use
- treatment or repeat swabbing is not normally continued after discharge

## Coming back to hospital

If you come back into hospital, it is important to tell the nurses and doctors that you have had MRSA. We may then isolate you and screen you for MRSA (by taking swabs) to check if it is still present. If it is clear you may be moved out of isolation.

## The MRSA policy

The Infection Prevention and Control Team monitor MRSA levels closely and carefully, giving advice to staff on how to prevent its spread. It's very important that we do everything we can to stop MRSA spreading, which might mean that patients have to move beds several times. All patients considered at high risk of carrying MRSA are tested between the seven days prior to admission up to the two days after admission..

## Further questions:

The hospital has an Infection Prevention and Control Team (IPACT), they are:

**Sarah Prevett** - Lead Nurse, Infection Control & Decontamination

**Nikki Cross** - Infection Control Specialist Nurse  
Consultant Microbiologists (through University Hospitals Sussex)

**Nicky Reeves** - DIPIC (Director of Infection Prevention and Control)

**Gilly Bradley** - Administration Assistant, IPACT

Should you have any further questions or concerns, please speak to a member of staff caring for you or contact them directly.

**Infection Prevention and Control Team - Tel:**  
**01342 414341 or 01342 414423**

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MRSA  
(Meticillin-Resistant  
Staphylococcus Aureus)

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