

Clostridium difficile

This leaflet offers more information about *Clostridium difficile*. If you have any further questions or concerns, please speak to the staff member in charge of your care.

What is *Clostridium difficile* and why have I got it?

Clostridium difficile is a bacterium (a germ) that can be found in low numbers in the bowel of 2% to 10% of the population. At low numbers it does not cause any harm. If the numbers of *Clostridium difficile* increase, it can cause diarrhoea.

How do you get an infection?

Infection with *Clostridium difficile* is most often linked to people taking antibiotics. Many other different bacteria live in our bowel. Most of these other bacteria are normal and do us good. They help to stop us becoming infected with potentially dangerous bacteria such as *Clostridium difficile*. They also keep the numbers of *Clostridium difficile* low for those people who already have it.

Some antibiotics change the delicate balance of bacteria in our bowel, allowing *Clostridium difficile* to grow in number. This can cause diarrhoea.

Patients particularly at risk of getting *Clostridium difficile* are people:

- having surgery
- with an underlying medical condition
- over 65 years old
- on antibiotics.

How is a diagnosis made?

Diagnosis is normally made by sending a sample of diarrhoea to the laboratory.

What are the symptoms?

Patients often have stomach pain with explosive, watery and smelly diarrhoea. This can last several days and sometimes weeks.

How will I be looked after?

If possible, you will be cared for in a single room while you have diarrhoea. Doors to single rooms are kept closed to reduce spread into the environment. This is because there is a risk of other patients catching the infection. *Clostridium difficile* may be spread on people's hands; staff caring for you will wash their hands and wear gloves and aprons to protect you and other patients.

Can my visitors catch *Clostridium difficile*?

Healthy people very rarely catch *Clostridium difficile*. The greatest risk is to those who are frail or unwell (like other hospital patients). Visitors planning to visit the ward should ask the nurses for advice if concerned they may be at risk. It is not normally necessary for visitors to wear gloves or aprons

However if visitors are having close contact with patients who are isolated (such as helping with washing and dressing) they should be worn. It is important that visitors wash their hands thoroughly with soap and water (not alcohol gel) when they leave the ward. (Alcohol gel does not kill *Clostridium difficile*, though it is effective at killing other common bacteria).

How will I be treated?

It is important that the staff looking after you know when you have diarrhoea so that they can give you the right treatment. If your diarrhoea is not getting better, your doctor may change your antibiotics or stop them. They may also prescribe another antibiotic to treat the infection. If your symptoms do not stop, it is important you tell staff looking after you.

What can I do to speed up my recovery?

It is important that you clean your hands with soap and water or detergent wipes:

- before you eat
- before you drink
- after you have been to the toilet.

Make sure that any food you have is covered or kept inside your locker.

What happens when I stop having diarrhoea?

Once your diarrhoea has stopped, it means the infection is settling. If your bowels have returned to normal for 48 hours it may be possible to stop infection control precautions such as the use of gloves and apron by staff. The staff looking after you will let you know when this is possible.

Will it delay my discharge from hospital?

Your doctors will decide if you are well enough to go home. They may want to make sure that your diarrhoea is settling and that you are able to eat and drink normally. It is important that you talk to the nurses or doctor if you are worried. If you are waiting to be transferred to another hospital, the transfer may be delayed until your symptoms have settled.

What happens if I have diarrhoea again?

Sometimes the diarrhoea can start again. This may be after you have gone home or while you are still in hospital. It is difficult to know exactly what the cause of the diarrhoea is. It can sometimes be as a result of the same infection or for another reason.

It is important to tell a doctor or nurse if your diarrhoea starts again. You may be asked to provide a sample by either your GP (if you are at home) or the nurses, if you are still in hospital.

What happens about washing my clothes?

If you have any soiled clothing, the nurses looking after you should put it into a plastic bag. Unfortunately we do not have facilities within the trust to wash personal clothing, so someone will have to do this for you. Healthy people are unlikely to be affected by *Clostridium difficile*, however we suggest the following actions are taken:

- It is best that this clothing is washed as a separate load to other items.
- The contents of the bag should be emptied straight into the washing machine and the plastic bag put into the rubbish bin.
- Hands should be washed with soap and water at this point.
- A pre-wash can be used if needed to remove excessive soiling.
- The hottest wash that will not damage the clothing should be used.
- Tumble-dry clothes or dry on a washing line.
- Iron clothes if possible.

Help us to prevent the spread of *Clostridium difficile*

- Please don't hesitate to ask staff if they have cleaned their hands before they treat or attend to you.
- Good hygiene is one of the best ways of tackling *Clostridium difficile*. Wash your hands with soap and water after a visit to the toilet, before every meal and at regular intervals throughout the day. Patients in bed can ask for a bowl of water for washing or use hand wipes.
- Anyone visiting a patient with *Clostridium difficile* should wash their hands with soap and water when they leave the ward. Visitors do not need to wear gloves and aprons unless they are giving physical care.
- Do not sit on any other patients' beds and do not let any visitors sit on yours. Please use the chairs provided.
- Keep the area around your bed clutter free. This allows us to clean the area more effectively.

Who can I talk to?

If you have any questions about your condition, please talk to one of the nursing or medical staff.

For further information, please contact:

If you have any questions or concerns about *Clostridium difficile*, please contact Infection Prevention and Control on 020 8725 2459 (Monday to Friday, 8.00am to 5.00pm).

Information about when you go home is available in the leaflet “**C. difficile: now you are going home**” accessible on

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/215563/dh_127429.pdf

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. **Web:** www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones. **Tel:** 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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