

MRSA SUPER BUG

YOU HAVE BEEN DIAGNOSED WITH MRSA SUPER BUG



WHAT IS IT?

MRSA (Methicillin-resistant Staphylococcus aureus) is the term used for bacteria of the Staphylococcus aureus group that are resistant to the usual antibiotics used in the treatment of infections. MRSA is responsible for several difficult-to-treat infections. The term increasingly refers to a multi-drug resistant group.

HOW DID I GET IT?

Most MRSA infections occur in wounds (e.g. surgical wounds), skin (e.g. intravenous access sites), or in the bloodstream.

TREATMENT

You must use three strategies to eradicate the MRSA Super bug including oral antibiotics, antibiotic cream/ointment, and antimicrobial soap. If used together for seven days, you will have more than 90% success rate.

Oral Antibiotics:

- Doxycycline 100 mg at breakfast and bedtime
- Rifampin 300 mg at breakfast and bedtime (one or two tablets)
- Please be sure to take all your medications!
- The most common side effects of antibiotics are rash and stomach upset.
- Rifampin can also cause a headache and visual disturbances.
- Rifampin causes a change in color of urine and tears. This is not harmful, except that it can stain soft contact lenses. You should not wear soft contact lenses while you are taking rifampin.
- If you develop any side effects, stop the oral antibiotics (continue the ointment and soap), and call Valley Skin Institute at (559) 472-SKIN.

Antibiotic Ointment

Mupirocin (Bactoban) - use a Q-tip to apply the ointment to the inside of each nostril three times a day - use a finger to apply a small amount to any area of skin breakdown.

Antimicrobial Soap (2% or 4% Chlorhexidine, also called Hibitane)

Use this soap for all handwashing, bathing, and showering. When using the chlorhexidine soap in the shower, apply the soap and lather all areas of your body from scalp to toes. After wetting your skin, let the soap lather sit on your skin for about one minute before rinsing it off.

Washing Linens

We also recommend changing and washing bed linens after 2-5 days while on eradication therapy. If possible, wash your sheets in the hot cycle of the washing machine.

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HOME NURSES

Nurses coming in from home care will need to take additional precautions (called MRSA precautions) until we are sure that the MRSA is gone. If you are receiving home care, the home care nurses will most likely take swabs about two days after the end of therapy, then once weekly for three weeks to make sure that the MRSA stays away. Exactly how many swabs are done and when may depend on your particular case.

PREVENT SPREADING MRSA

- If you are re-admitted to the hospital in the next six months, you will also need to be in MRSA precautions until testing is done to make sure the MRSA is gone. The precautions mean that you will have a private room, and that staff entering the room will wear gowns, gloves, and masks. This is to prevent the MRSA from being transferred to other patients.
- When you are admitted, the hospital will take swabs of your nose and rectum to see if the MRSA is there or not. The cultures take 2-3 days (occasionally 4) to grow; your nurses and doctors will let you know the results as soon as they are available.
- If you visit a doctor, please let them know that you have had MRSA, so that they can take extra precautions if necessary to prevent the spread to other patients.
- You do not need to take special precautions at work or school or limit any of your activities in the community.
- You do not need to worry about giving MRSA to your friends, no matter how old or ill they are.
- MRSA does not spread in the community. The only time that you might spread MRSA is in your household. Spread in households is uncommon. If a member of your household has a serious medical illness (for instance, cancer), they should talk to their doctor about whether they should be tested for MRSA.