

## What action will staff take?

All members of staff having direct contact with you and your environment will wear disposable aprons and gloves. These will be changed between patients. This acts as a protective barrier to their uniform and clothing, and lowers the risk of C .difficile being passed from patient to patient. Staff will **wash their hands with soap and water** following removal of the protective clothing.

## Will I be isolated?

Patients will be transferred to an side room This limits the risk to others and enables the nursing staff to concentrate on the needs of C. difficile patients.

## What can I do?

### **HYGIENE IS THE MOST IMPORTANT THING!**

Keep your hands washed and avoid touching dressings. Try to eat and drink as normally as possible. Eating plain live yoghurt has been found to help restore the balance of good bacteria.

If you are incontinent with this infection you should wear hospital nightwear to avoid contaminating your own clothing. If necessary your clothing can be laundered at home, although it is advisable to launder this separately on the hottest wash the fabric will tolerate.

# Clostridium Difficile

## Information for Patients and Visitors



## What is Clostridium difficile?

It is a bacteria that causes diarrhoea. Most people will recover quite quickly, but in some cases the illness can be severe. This type of diarrhoea can occur when antibiotics are given to treat another infection. Antibiotics reduce both good and bad bacteria, and when good bacteria are destroyed, some bad ones, such as Clostridium difficile, normally kept under control by the good, may flourish.

The risk is reduced with simple hygiene procedures, and the effect for a patient can be lessened by quick positive action. Staff, patients, and visitors alike can help.

**You can help us to control this infection  
by washing your hands!**



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# Information for Patients & Visitors about Clostridium Difficile

## What about visitors if I have C. difficile?

- They must always **clean their hands with alcohol gel** before coming on to the ward (found on the wall at the entrance to every ward). Although the alcohol based gel does not work on C. difficile it will help reduce the risk of other organisms which visitors may bring into the ward.
- They should report to the nurse in charge of the ward for advice.
- It is everyone's responsibility to ensure that they follow these guidelines to help reduce this possible problem
- They will need to wear a plastic apron and disposable gloves which will be on a trolley near to your bed, or at the entrance to the bay you are in. Before they leave these should be removed, by removing first of all the apron, followed by the gloves, and placed in the bin with the orange bag within your bay, room, or area. They must then **wash their hands with water and soap** as they leave the ward. This will reduce the risk to them of potentially acquiring the infection.
- Only two visitors are allowed at a time. It is advised that young children do not visit the ward. Anyone who is not feeling well or is taking tablets that suppress the immune system (for arthritis or asthma, for example) should not visit either.
- It is okay for visitors to kiss you and hold your hand but thorough **hand washing** is always recommended after contact, especially after going to the toilet and before eating meals. Visitors should sit in a chair rather than on your bed.
- Finally, your visitors should not visit any other patients in the hospital on the same visit.

Most people will get over C. difficile quite quickly, but some may be severely affected – mostly the older patient or more rarely, the very young, who are having antibiotic treatment for some other condition.

# Information for Patients & Visitors about Clostridium Difficile

There are many different strains of C. difficile, all of which can be treated with antibiotics. The symptoms of the infection can be more severe and last for a longer period of time with the more virulent strains. Patients with any strain of C. difficile may die of complications associated with the disease but the risk is greater with the more virulent strains.

## Can it be treated?

Yes. The antibiotics currently taken will be stopped whenever possible and specific antibiotics to treat C. difficile will also be given. Patients are being given live yoghurt (which helps to restore the balance of good bacteria) in their diet as part of their treatment.

## How does it happen?

Some people (approximately 3%) have the bacteria present in their bowel. Most of the time, this is harmless. However, some strains of C. difficile are resistant to antibiotics, so when a patient receives a course of antibiotics, these bacteria can flourish. It results in mild or severe diarrhoea. Another way of catching C. difficile is from other people or your surroundings, because, when the bacteria is not in the right environment for it to survive it becomes a "spore" (like a hard seed, but very tiny). Just like a seed, when it reaches the right environment again, it will start to grow.

## How will the doctors know I have C. difficile?

A sample of your stools would be sent to the laboratory and C.difficile identified there.

## Do I need to be treated in hospital for C. difficile?

No, as many patients in community settings will also have this infection. As long as you are well enough to go home and your diarrhoea has subsided you do not have to wait until it is completely clear. If you feel you would like to go home whilst you still have diarrhoea you will be assessed to see if you are well enough to go home. If you are going to a nursing or residential home situation then it is advised to wait until your symptoms have stopped and have remained so for at least three days.