

Welcome

to the 19th RESIST newsletter from the Antimicrobial Resistance and Infection Control (AMRIC) Team. In this edition we look back on International Infection Prevention Week, European Antibiotic Awareness Day, the new AMRIC Hub on HSELand and AMRIC resources. We have lots of updates on antimicrobial resistance and IPC.

Thanks for your comments and inputs, if you have any suggestions on content or want further information please contact us on hcai.amrteam@hse.ie

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Dr. Colm Henry, HSE Chief Clinical Officer

As Chief Clinical Officer for the HSE, I welcome the publication by the Department of Health of The National Clinical Guideline for Infection Prevention and Control No 30. This was not an easy task but one that was led by Professor Martin Cormican, as Chairperson and members of the Guideline Development Group. I want to thank you this group for their commitment through the development of this particularly important and complex guideline.

I want also to thank Dr. Eimear Brannigan, AMRIC Clinical Lead for her expert clinical knowledge and the AMRIC team for their support for this work. This document is a welcome support all health and social care professionals in their work, as well as supporting the safety of patients, their families and carers.

Antimicrobial resistance (AMR) has been recognised and as one of the greatest potential threats to human and animal health.

Antimicrobial resistance has long-term consequences for health and healthcare and these will be profound unless we act now. The two pillars of the response are: (a) improving how we use antibiotics and (b) improving infection prevention and control. If we prevent infection, we need less antibiotics.

The foundation for the control of infection has been the care and attention to detail of the “hands on” carers with support from the local and national infection prevention and antimicrobial teams.

I would like to give a special mention to these teams across the country for their extraordinary contribution. Their work across the whole spectrum of healthcare prevent healthcare infections amongst the most vulnerable of people, keeping patients and colleagues safe and protecting services.

Every day antibiotic resistance is making people suffer more and die younger than they need to. We know that every year many people in Europe die earlier from antibiotic resistance. Antibiotics were the wonder drugs of the last century; the magic bullets. We got better at making antibiotics in bulk and doing it cheaply.



Dr. Colm Henry, HSE Chief Clinical Officer

For more than 50 years most countries in the world have been using vast amounts of antibiotics in people, in animals and in forestry. Nearly every time we kill bacteria with antibiotics most of them die but a tiny few survive and multiply. Years of using lots of antibiotics around the world have left us with a world where those antibiotic resistant superbug numbers are increasing in people, in animals and the environment (water and soil).

At the same time, over all those years of overusing antibiotics, people have started to live longer because of better living conditions, and better understanding of how to manage complex health conditions. The price of that progress is more people vulnerable to infection and more people who need high tech healthcare. A lot of the progress in modern medicine depends on protecting vulnerable people from infection during their treatment using antibiotics

This requires a further committed to rising to the challenge of translating knowledge and understanding and supporting changes in our services. We know we can succeed. We now risk losing a lot of the progress because our antibiotics do not work so well. There are superbugs in existence now (e.g. MRSA, VRE, ESBL and CPE) that are resistant to many of the antibiotics we have. There is also very little progress in the development of new antibiotics.

It is important therefore that health and social care workers are aware of this context in which we work, and that measures to prevent infection are an essential part of our goal of using antibiotics less and more appropriately.

Raising awareness and education and training are key deliverables for the AMRIC team and IPC and AMS teams across our services, you would have seen many teams raising awareness over the recent IPC week and European Antibiotic Awareness Day It is always a good opportunity to remind us all of our key messaging, these include:

- Antibiotics can cause more harm than good if taken unnecessarily.
- COVID-19, influenza, colds are viral infections – antibiotics will not work and may cause side effects..
- Public health measures to stop the spread of common winter viruses
- Winter vaccines are effective against their target viruses.
- If you do need to take antibiotics, take them as prescribed; contact your healthcare worker if you have any serious side effects.
- Take care of yourself and learn to treat common illnesses that do not require antibiotics use www.hse.ie/conditions/common-illnesses/
- Never share antibiotics or take them without a prescription.
- Stay home if feeling unwell.

Thank you to you all for the work that you do, it is greatly appreciated. I would like to wish you and your loved ones a happy, healthy and safe Christmas. I hope you get to take a well-deserved break.

Míle buíochas d'achan dhuine, GRMA,

Dr Colm Henry,
Chief Clinical Officer

NCEC national clinical guideline No.30 IPC now accessible online

The Department of Health has published the final version of the new National Clinical Effectiveness Guideline (NCEG). The guideline was developed to provide clinical staff with evidence-based actions to guide practices for Infection Prevention and Control (IPC).

The development of this guideline was led by the Infection Prevention and Control Guideline Development Group, chaired by Professor Martin Cormican, Consultant Microbiologist Galway University Hospital and Professor of Bacteriology, School of Medicine, University of Galway. Professor Cormican was formally National Clinical Lead for Antimicrobial Resistance and Infection Control and is now the Clinical Lead for Pathology. This guideline is supported by the Health Service Executive (HSE); in particular, the HSE National Programme for Antimicrobial Resistance and Infection Control (AMRIC).

Infection prevention and control is a key enabler of delivering safe health and social care for patients, their families, and staff. This guideline aims to:

- Support staff when making clinical IPC decisions
- Help staff develop local IPC protocols and processes where needed
- Improve the quality and safety of healthcare in Ireland

[Read the new National Clinical Guideline for IPC](#)






We have just marked another European Antibiotic Awareness Day (EAAD), November 18th 2023. This annual event is to remind everyone how valuable antibiotics are, how important it is that we use them only when we need them and to highlight that these amazing drugs are under threat from the growing problem of antibiotic resistance.


The AMRIC team held a workshop on November 28th 2023 to mark EAAD and the publication by the Department of Health of The National Clinical Guideline for Infection Prevention and Control No 30. This document is a living document and is a resource that we want staff to draw from to provide underlying support for when they are making local decisions.

Economic burden of antimicrobial resistance (AMR)


AMR is a global public health concern. It is defined as the ability of a micro-organism (such as a bacterium) to stop an antimicrobial from working against it.

Antimicrobials - such as antibiotics - are medicines used to prevent and treat infections. Due to wide spread AMR they become ineffective at fighting infections.






We conducted a **literature review** followed by an **economic analysis**.




We focused on **8 antimicrobial-resistant bacteria** of public health concern.




We estimated the costs for **50 public acute hospitals** in Ireland, in 2019.

Over 4,700 resistant infections occurred in 2019, costing the health service an additional **€12 million** due to longer hospital stays.



Due to a lack of complete data, this is an **underestimate of the total cost**. These infections resulted in about 215 deaths and almost 5,000 years of full health lost.


AMR also places a significant burden, both health and financial, on patients, carers and families.



We found the burden of AMR in Ireland is similar to that reported for certain cancers and rheumatoid arthritis.

There is a need for enhanced surveillance of AMR in Ireland. This would lead to:

- earlier identification and management of AMR threats
- allow an estimate of the true cost of AMR in Ireland.



[Economic burden of antimicrobial resistance - HIQA 28 July 2021](#)

One of the consequences we are seeing is what we perceive as a de-skilling of staff in risk assessment and IPC decision making. Many of our highly skilled IPC staff have become reliant on centralised or national responses to manage local issues. This national guidance will support staff dealing with the ever changing landscape of infection risks but always based on the underlying principles of safe healthcare.

Guidance will never replace professional judgement on particular cases or circumstances if an individual guideline recommendation is not appropriate in the circumstance presented. You can find the National Clinical Guideline for Infection Prevention and Control No 30. [here](#)

Happy Christmas



Dr. Eimear Brannigan, HSE Clinical Lead for antimicrobial resistance and infection control



Our wonderful AMRIC colleague Sarah Fagan, Community Antimicrobial Pharmacist, tragically lost her life in late July doing a triathlon, something that she loved to do. The AMRIC team want to pass on our deepest sympathies to all of Sarah's family, her many friends and all of her colleagues who worked with her over the years.

Sarah was so committed to improving peoples lives and protecting the future use of antibiotics. She was always to the fore when it came to leading work on www.antibioticprescribing.ie and promoting effective antibiotic use. But what people will miss is her smile, enthusiasm and support. I urge you to read the words below of her close colleague Mala Shah on behalf of the antimicrobial pharmacists.

Ar dheis Dé go Raibh a nAnam.

Dr. Eimear Brannigan, Clinical Lead, AMRIC team



We are lost for words on the tragic loss of our beloved work colleague Sarah Fagan.

We had the privilege of working with Sarah for the last three years. She was an exemplary pharmacist and an integral member of our team of HSE Community Antimicrobial Pharmacists. She continuously sought opportunities to spread the AMS messages far and wide within her work region of Offaly, Laois, Westmeath, Longford, Meath and Louth, and far beyond.

She always had a positive attitude, a big smile and kind and encouraging words for all. Although our team of pharmacists is spread around the country, Sarah was close to each and every one of us, a great support to us all with sound, encouraging advice whenever needed.

She had a huge wealth of experience and knowledge to bring to our team. She would always provide useful solutions to any issues we encountered. She had an eagle eye and always made positive and valuable contributions to any documents we were working on, thinking through potential issues and coming up with practical solutions. She was a key member of our Skip the Dip project team.

She was the lead coordinator for one of the expert advisory groups for the national antimicrobial guidelines for community settings and her expertise and impeccable work has greatly enhanced the content of the guidelines.

She was a very dedicated antimicrobial pharmacist, undertaking several courses to expand her knowledge base and skills. She was always thinking ahead of how we could further our profession and identifying opportunities to promote our work and team.

She has been such a positive influence to us all, and we inspire to live up to her high standards of work and be as thoughtful, kind and supportive to all, as she was to us. For a very long time to come, in many situations we will encounter, we will find ourselves reflecting 'What would Sarah have said or done?'. Now as a shining star, she will be guiding us from above.

Mala Shah, Chief II Antimicrobial Pharmacist, Quality and Patient Safety, HSE Community Operations on behalf of the HSE Community Antimicrobial Pharmacists Group and the Antimicrobial Guidelines Working Group for www.antibioticprescribing.ie



Making services safer; introducing the new National Clinical Surveillance Infection Control System

HSE Acute and Community services, eHealth and AMRIC are working together to introduce a National Clinical Surveillance IT System for Infection and Prevention Control. The introduction of this software will help support surveillance of HCAI will play a key part in control of HCAI, it is estimated that about half of HCAIs can be prevented. The system is a Baxter product called ICNET and it will be available across all Acute and Community services.

This is a multi-million project which will deliver significant benefits to the patients, service users and staff. IPC teams will now have access to a “one stop shop” for all their IPC information in relation to their patients or service users. Having everything in the one system means that the IPC teams have fast access to all the information they need to deliver care that is appropriate and timely which reduces the number of HCAIs. The system assists staff in the timely management of outbreaks. It significantly reduces the administrative burden on these teams and has additional features such as clinical audit.

Deirdre Mullins, Project Manager with AMRIC says *“the system also has comprehensive reporting capabilities which can be configured to support local needs, it delivers enhanced workforce productivity due to greater efficiencies in obtaining patient information, record keeping, and administration”*. Procurement of the system has now completed and implementation plans are in development. Areas are in the process of establishing their Local Implementation Groups (LIGs). These LIGs will have membership from both acute and community services to ensure that an integrated approach is taken to implementation.

There are a number of hospitals which already have clinical surveillance systems in place for Infection Control, these include Tallaght University Hospital, Kerry University Hospital and across UL Hospitals Group. Currently a project is underway across the Saolta Hospital Group in collaboration with CHO1 and CHO2 to roll out such a system in an integrated way across acute and community services. As part of that project Galway University Hospital, Mayo University Hospital and Roscommon University Hospital went live late 2022.

A national eHealth project team is now in place and Informatics Nurse posts (CNM2) are being appointed in each Hospital Group to support implementation of this system. These Informatics Nurses are forming a network, they held their first meeting on the 27th of July. Colleagues from AMRIC, eHealth, CHI, ULHG, Saolta and SSWHG were present to share learning from previous implementations, plan for the future and develop a community of practice.

It is planned to implement this system progressively on a phased LIG basis. If you would like more information or would like to speak to someone working on this project, please contact Deirdre.Mullins@hse.ie or Cathal.Collier@hse.ie

From l-r: Dr. Deirdre Mullins, AMRIC Project Manager, Avril Blade, Informatics CNM2 Saolta Group, Bernie Hannigan, eHealth Project Manager, Cathal O’Conallain, eHealth Project Manager, Cathal Collier, eHealth General Manager, Sinead Conroy, Informatics CNM2 ULHG Group, Sarah Whoriskey, Informatics CNM2 CHI Group, Regina Monahan, AMRIC Project Manager, Laura Moore, Informatics CNM2 SSWHG Group



15th – 21st October 2023 was International Infection Prevention Week which was marked in many services across the HSE this year. The focus this year was on maintaining awareness of and adherence to IPC practice and in particular good hand hygiene. All of us working in the IPC world have always highlighted the importance of hand hygiene even though it is such a simple thing. We know that sometimes the simple things are the hardest to do.

You can order hand hygiene posters and leaflets from www.healthpromotion.ie, please be aware delivery can take 10 working days depending on the numbers of orders being processed. There is a wide range of information on www.hse.ie/handhygiene



IIPW Stand at Midland Regional Hospital Portlaoise

European Antibiotic Awareness Day 18th November 2023

European Antibiotic Awareness Day (EAAD) is an annual event to remind everyone how valuable antibiotics are, how important it is that we only use them when we need them and that these drugs are under threat from the growing problem of antibiotic resistance.

A key message of EAAD is to only use antibiotics when they are likely to help someone who is sick get better faster and in special circumstances when the use of an antibiotic can prevent serious infection. It is safer for you not to take an antibiotic you don't need because antibiotics like all medicines can have side effects. Antibiotics don't help you to get better faster if the infection is caused by a virus such as COVID-19, colds or flu.

Antibiotics can cause more harm than good; they should be used only as prescribed and when needed.

- Antibiotics don't work for viral illnesses including COVID-19, colds or flu. If you have a cold or flu, visit www.undertheweather.ie for advice on how to help yourself get better and ask your doctor for advice if you are concerned. If you have symptoms of COVID-19 please ring your GP.
- Antibiotics should be taken exactly as prescribed - at the right time for the right duration.
- Never share antibiotics or take them without prescription

We want to thank the many HSE services who helped to mark this day and as always work tirelessly to spread the word about Antimicrobial Stewardship.



EAAD Stand at St Vincent's University Hospital



EAAD Stand at St. Ita's Community Hospital, Newcastlewest





SKIP THE DIP – a new awareness campaign for HSE residential services

SKIP THE DIP for UTI in over 65s is a quality improvement initiative in HSE older persons residential care facilities (RCFs) led by HSE Community Antimicrobial Pharmacists, HSE Quality and Patient Safety Office, in collaboration with the national AMRIC team. This new initiative aims to reduce the levels of inappropriate prescribing for UTIs in people aged 65 years and older. UTIs are the most common reason for antibiotic prescribing in older persons RCFs. We know that inappropriate use of urine dipstick tests can lead to unnecessary antibiotic prescribing. This does not benefit the resident and may cause considerable harm including adverse effects, drug interactions, and antimicrobial resistance.

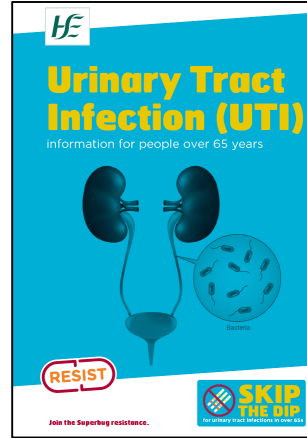
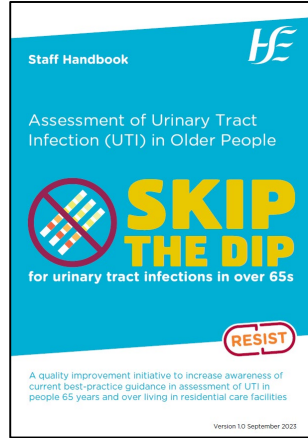
Asymptomatic bacteriuria (ASB) is the presence of bacteria in the urine without symptoms of a UTI. It is particularly common in those aged over 65 years and is very common in those persons with an indwelling urinary catheter. Urine dipstick tests are not a useful marker to assess for evidence of UTI in older people as they do not distinguish between ASB and UTI.

Mala Shah, Chief II Antimicrobial Pharmacist, project lead says, *“Reduction of harm in relation to antibiotic use and antimicrobial resistance is a key priority for the HSE. Antibiotics should be prescribed in line with national guidance available at www.antibioticprescribing.ie based on clinical signs and symptoms of UTI in older persons, not a urine dipstick test result. The HSE Community Antimicrobial Pharmacists will be working with HSE older persons RCFs across the country in the coming months to raise awareness of this quality improvement initiative and work with staff to help promote best use of antibiotics, improving patient care.*

We would like to acknowledge our late colleague, Sarah Fagan, for her significant contributions to the development of this initiative. She is greatly missed and fondly remembered by all. May she rest in peace.”

Stocks of resident information leaflets, staff education booklets, posters, banners and merchandise are being distributed to HSE older persons residential care facilities by the IPC/AMS teams. The resources to support the SKIP THE DIP initiative, including a webinar recording for staff education, are also available to download [here](#)

Staff handbook and Patient information leaflet



Patient information leaflet



Mary Regan Senior Antimicrobial Pharmacist accepts an award for best ePoster at the “Collaborating Across Borders: a multidisciplinary approach to AMS” Conference 3rd Oct 2023



The AMRIC hub has been launched on HSELand. The hub is designed to support healthcare workers to access resources specific to AMRIC by ensuring improved accessibility as it is a central repository for all the AMRIC eLearning modules.

The hub will be accessed through the Hubs and Resources tab on HSELand. On the Hub home page, you will find a short video from the Clinical Lead, Dr Eimear Brannigan, welcoming users to the hub and sharing some basic information about AMRIC and the Hub. Also featured under this tab will be details of any upcoming events related to AMRIC. Other tabs include:

- 'About us' which provides information about AMRIC, and will be a place to share more information about our team.
- 'Modules' which has a list of all AMRIC modules and will be a place for AMRIC to share any new modules or module updates.
- 'Resources' will provide access to any additional resources or information that may be of use to staff. Currently this includes the National Clinical Guidance: Infection Prevention and Control No 30. There is also a link available to support ordering patient information leaflets, posters etc.

We hope that this Hub will make access to the AMRIC learning resources more accessible for all staff along with reminders to upcoming events as well as accessing recent RESIST newsletters.

Welcome to the AMRIC ELearning Hub update

Watch the video of AMRIC Clinical Lead, Dr. Eimear Brannigan below to find out more.



Updated eLearning Modules

The AMRIC Team have launched new and updated eLearning resources. These modules have gone live on HSELand and are marked in red on the Modules page of the AMRIC Hub. 2 new eLearning modules added for December are Hand hygiene and Personal Protective Equipment (PPE)

We are further developing and updating IPC and AMR eLearning modules for all healthcare staff based on the recently published Infection Prevention and Control (IPC) National Clinical Guideline No. 30.

All our modules are available on HSELand and are accredited with NMB. The New and Updated modules are:

- Microbiology and surveillance (new)
- Antimicrobial stewardship (updated)
- Respiratory hygiene and cough etiquette (updated)
- Aseptic technique (updated)
- Standard and transmission based precautions (updated)
- Basics of IPS (updated)



Our team would like to thank all the stakeholders who provided valuable feedback in order to appropriately capture elements of IPC in various settings where healthcare is delivered. This will broaden the scope of the e-learning modules and meet the educational needs of different staff groups in these areas.

The HSE AMRIC team hosted a event titled “Implementation of Infection Prevention and Control (IPC) National Clinical Guideline No. 30: working and learning together”.



Dr. Eimear Brannigan, AMRIC Clinical Lead leads a panel discussion



A multidisciplinary group works through the workshop case study

The rest of the day featured multiple speeches and a panel discussion all centred around helping our colleague’s implement the new clinical guideline. We would like to thank everyone involved in making the day such a success.



Dr Colm Henry, Chief Clinical Officer, HSE Delivers his opening address

The centrepiece of this event was the workshop devised and implemented by our Nursing Team led by Josephine Galway. This workshop gave our colleagues a chance to get some hands on experience implementing the new guidelines.

Three case studies were selected for assessment by 12 tables made up of professionals across multiple disciplines including doctors, dentists, nurses, pharmacists, healthcare managers and patient representatives.

Each of these group discussions were moderated by a facilitator who then provided feedback to the room. Other participants used Slido to deliver their feedback via a series of polls and surveys.



Congratulations to the AMRIC Team on a very successful event





AMRIC Nurse Barbara Slevin engaging with colleagues at the AMRIC Stand at the 7th National Sepsis Summit 19th Sept 2023



A busy AMRIC Stand at the 7th National Patient Safety Office (NPSO) Conference 19th Oct 2023



Nora Dwyer accepts 1st place general poster award at the NPSO Conference on behalf of Mala Shah and the HSE community antimicrobial pharmacist team

New patient information leaflet available to order: Infection control tests in healthcare settings

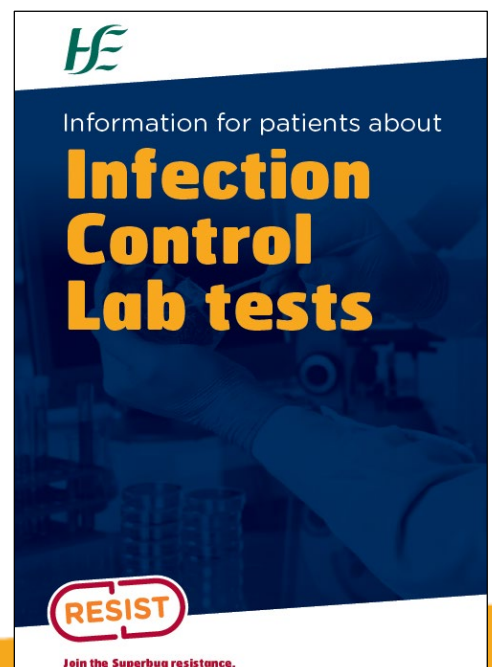
The AMRIC Team has produced a new patient leaflet that provides information on infection control tests carried out in healthcare settings. For most patients there is a lack of knowledge about the various tests that staff need to take and this leaflet is useful to explain why these tests are taken in different healthcare settings.

Sometimes, when patients and residents are receiving care in a healthcare setting, these tests are taken for a variety of reasons, including to check for infection and as appropriate, to screen for multi drug resistant organisms (MDRO), as required and in line with local and hospital policies. The leaflet provides reassurance and an explanation that for most people most of the time, these MDROs live harmlessly on the skin or in the body (“carriage or colonisation”).

When a person we care for has an infection, these test results help the clinical team to decide on the best course of treatment for example the use of appropriate antibiotics, in accordance with antibiotic prescribing guidelines. The leaflet outlines taking tests on samples of, for example, urine, sputum, wounds, skin, faeces etc. that are taken from the people we care for.

The leaflet has been developed in partnership with NALA to ensure that it is easy to understand and useful for people we care for. This leaflet is available for order on www.healthpromotion.ie. Please place an order to ensure you have this useful patient information resource to help your patients understand why they are being tested. The information is also available as a printable A4 factsheet in Irish, French, Polish, Spanish, Russian and Ukrainian. The translated information is accessible [here](#).

Also available to download is a new A4 factsheet (link to be added in) **Healthcare associated infections (HCAI) and Antimicrobial Resistance (AMR); Information for healthcare workers**. This factsheet supports healthcare workers to understand and explain to the people we care for what a healthcare associated infection is; what antimicrobial resistance is and how we all have a role to play in reducing HCAIs.



St. Columcille's Hospital in Dublin and Cavan & Monaghan Hospital in Cavan have both been accredited by the BSAC Global Antimicrobial Stewardship Accreditation Scheme (GAMSAS).

BSAC GAMSAS is a global accreditation scheme that sets standards for antimicrobial stewardship (AMS) programmes. St. Columcille's Hospital was the first organisation in Ireland to achieve BSAC GAMSAS accreditation shortly followed by Cavan & Monaghan Hospital. This demonstrates the HSE's commitment to combating the global risk of AMR and supporting antimicrobial stewardship. We are grateful to the BSAC GAMSAS team for their support in this process.

AMR is a growing global health threat. It occurs when bacteria, viruses, fungi, and parasites change over time and no longer respond to medicines that once could treat them effectively. AMR can lead to longer, more expensive hospital stays, increased risk of death, and the spread of infections to others. AMS is a key strategy for preventing and controlling AMR. It involves a range of interventions, such as:

- Promoting prudent use of antibiotics
- Developing and implementing guidelines for antibiotic prescribing
- Educating healthcare professionals and patients about AMR
- Monitoring antibiotic use and resistance

BSAC GAMSAS accreditation is a valuable tool for organisations that are committed to improving AMS. It provides a framework for organisations to develop and implement effective and sustainable AMS programs, and it helps to ensure that these programs are meeting high standards of quality.

Both Hospitals are committed to providing high-quality care to their patients. BSAC GAMSAS accreditation is a significant milestone in their efforts to combat AMR and support antimicrobial stewardship. Congratulations to the teams in St. Columcille's and Cavan & Monaghan Hospitals



Certificate of Accreditation for Cavan & Monaghan Hospital



(L) Dr. Susy Fitzgerald, Consultant Microbiologist & (R) Claire McSherry, Senior Antimicrobial Pharmacist, St. Columcille's Hospital

*Scabies is caused by infestation with *Sarcoptes scabiei*. The mite burrows into the skin epidermis where it lives and lays eggs. Over time, the host develops sensitivity to the mite and its excreta which cause intense itch and a rash.*

Epidemiology

Scabies is not a notifiable disease, so information is not available on incidence or secular trends in Ireland. Outbreaks of any infectious disease are notifiable, and the best available Irish data on scabies indicate increased notification of outbreaks to the Health Protection Surveillance Centre (HPSC). As of 4th October 2023, 16 scabies outbreaks have been notified, double the number reported for all of 2022. Readers who become aware of cases in congregate settings should notify them to their local Dept. of public health.

Scabies has been increasing in recent years in Europe. Although data is limited, studies in Netherlands and Norway indicate significant increases in primary care.

Clinical features

Clinical features include a symmetrical papular itchy rash all over the body, particularly affecting the web spaces, hands, feet, wrist flexors, elbows, umbilicus, genitals and female areolae. Symptoms are typically worse at night or after hot baths. Scratch marks result from the intense pruritus. Scabies infestation is highly contagious and household contacts are usually itchy. Since the itch begins about 4-6 weeks after initial infestation, household contacts may not be symptomatic at the time of presentation of the index case.

Factors to consider when treating scabies

All householders should be treated during the same 24-hour period with a repeat application one week later. Visiting relatives in the previous month and sexual contacts may require treatment. Careful concordance with manufacturer treatment instructions is important, including careful application to web spaces and under finger and toenails. Sometimes infested householders who are not yet symptomatic leads to these contacts not treating themselves concurrently with the index case. Subsequent household re-infestation is inevitable. This can erroneously be interpreted as treatment resistance.

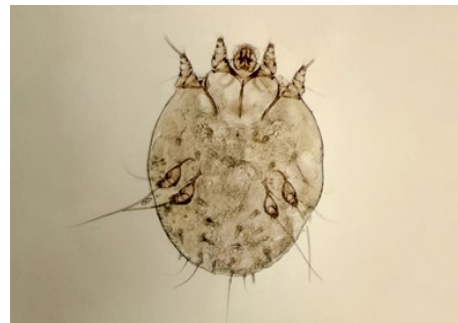
There is a need to reapply scabicide, including under fingernails after handwashing to reduce treatment failure risk. Clothing, bedding and towels should be washed at a high temperature or sealed in a plastic bag for 72 hours or placed in a freezer to eradicate mites. Symptoms can persist for weeks after successful treatment, but if new burrows appear, a second course of treatment for the household should be considered. Return to work 24 hours after the first treatment application is permissible. Specialist advice should be sought in relation to treating children under 2 years of age. Crusted scabies (e.g. in the immunocompromised or those with low mobility) also require specialist input.

Resistance to permethrin (first line) or malathion (second line) treatment is rare. Malathion is listed on the Health Products Regulatory Authority Medicines Shortage List as being unavailable at present with a return date of 31st January. Anecdotally pharmacists are having difficulty accessing permethrin. Third line treatment is benzoyl benzoate 25% w/v. Treatment with the latter requires application on two consecutive nights with reapplication on two consecutive nights a week later. Further information is available at www.antibioticprescribing.ie.

For those in financial difficulty, the community pharmacist may need to apply for the medication under the hardship scheme. An alternative support is to apply to the community welfare officer may be to support treatment costs.

Authors:

Dr Scott Walkin, Irish College of General Practitioners Lead for Antimicrobial Resistance and Infection Control (AMRIC)
 Dr Derval Igoe, Consultant in Public Health Medicine-Health Protection HSE Public Health: National Health Protection Office



This is a repeated article to remind staff that you have access to a wide range of patient leaflets and translated patient information. Please allow 7 working days for completion of orders.

There are a number of AMRIC print resources available to order including awareness posters, guidance posters and patient information leaflets. These resources are available to order online from www.healthpromotion.ie. To place an order you should first set up a professional account when registering. To access the AMRIC resources you should type RESIST into the search box. This will bring up the items that are currently available to health professionals to order.

Examples of the printed patient information leaflets include the following:

CPE	<i>C. Diff</i>	VRE
MRSA	ESBL	IV lines
How to take your antibiotics	Norovirus	Urinary catheters
Infection prevention in hospital	Multiple Drug Resistant Organisms (MDROs)	

We have also updated and reviewed the translated version of all of the leaflets in French, Irish, Polish, Russian, Spanish and Ukrainian. The fact sheets are available to download and print [here](#) Please note that in some translations you will need to open on the link to identify the content. It will be shown in the title line at above the document.



RESIST merchandise (t-shirts, note books, bags etc) is reserved for hand hygiene day, European Antibiotic Awareness Day and RESIST launches. Merchandise will continue to be issued via the AMRIC team and are not available to order online. If you have any queries please contact the AMRIC team

hcai.amrteam@hse.ie

