Fact Sheet 4 of 6

Subject:

Information for patients carrying CPE

For:

Patients, relatives and healthcare workers



What does it mean for me if I carry CPE?

Most people first hear that they are carrying CPE when their doctor or nurse tells them the result from a swab or a sample of faeces (poo) that tested positive for CPE. If the swab is positive this means that you are carrying the CPE bug in your gut. In most people the CPE will stay in the gut. If CPE stays in the gut it will do no harm. If you have been told that you carry CPE in your gut (carrier /colonisation) then most likely it will not do you any harm. If you carry CPE you will see that hospital or nursing home staff will have to take extra care with you to help stop spread of CPE to other people.

If you carry CPE the hospital will try to make sure that you have your own room and your own toilet and shower. If the hospital can't give you your own room with a toilet and shower they will try to make sure you are sharing a room with someone else who also has CPE. Hospital staff will have to use aprons and gloves when they care for you more than they do when caring for most other people. Sometimes staff will wear a full surgical gown with long sleeves to cover their uniform when they are taking care of you. While in the hospital people with CPE are asked to have as little contact with other patients as they can to stop spread of CPE. For example, people with CPE should not share food, newspapers or other personal items with other patient when in hospital.

What does it mean if the nurses and doctors say they want to test me for CPE?

When you are tested for CPE it means your nurse will have to take a swab from the back passage (rectum). The swab is very small so it does not hurt to have the swab taken but for many people it does feel uncomfortable and embarrassing. For some people it may be upsetting but taking the swab is very important for you.

CPE does not cause diarrhoea, vomiting or upset tummy. The reason for taking the swab is to get a sample of the gut bacteria so that they lab can check to see if you are carrying CPE in the gut.

It is good for the hospital to know if there is CPE in your gut. If you go on to develop an infection sometime weeks or months later the nurses and doctors caring for you will know very early on that you might have CPE infection and can choose special antibiotics with the best chance of working. Knowing if you carry CPE is also important to help stop spread of CPE bugs and protect other patients.

If you really can't stand the idea of a rectal swab, then a sample of faeces (poo) can be used but this means you need to tell the nurses or doctors before you go to the toilet so that they can arrange with you to get the sample and it usually means that it will take longer to get the sample.

How does CPE spread?

CPE lives in the gut along with billions of other gut bugs; most gut bugs are good for you. When you to the toilet about half of the faeces (poo) that you pass is made up of these gut bugs. The bugs are very, very small. Look at the dot on this letter i. - it would take millions of gut bugs to cover that dot. This means that even the tiniest trace of poo, even on things that look clean; hands, clothing, furniture can be enough to pass on the CPE bug to another person.

For example, maybe you touch something that looks clean – there is a CPE there that gets on the tip of your fingers. You put your hand to your mouth and you put the CPE in your mouth. Maybe someone else gets CPE on their fingers and then they give you food or medicine and they put the CPE into your mouth. The CPE then goes down into your gut and makes itself at home. CPE is even more likely to make itself at home and multiply quickly if you are already on antibiotics.

Although antibiotics are very useful when you need them one of the unwanted downsides of using any antibiotic is that it will kill off a lot of the normal "good" gut bugs. As the normal good bugs die this makes your gut a better home for CPE.

Do probiotics help to protect against CPE?

We do not know for sure if probiotics help to prevent someone getting CPE or if they help someone who has CPE to get rid of it. Products such as probiotics yogurts from reputable suppliers are unlikely to do harm and there is some evidence that they may reduce the risk of diarrhoea in some patients taking antibiotics.

Why do hospital nurses and doctors wear aprons or gowns and gloves when taking care of me?

The hospital staff take steps to help stop them from carrying CPE from you to any other patient. The most important way to do that is to carry out hand hygiene/wash their hands every time after they touch you or your bed space. Sometimes if they are going to be very close to you they may have to wear a plastic apron or a gown to make sure that CPE does not get on their uniform and they might wear gloves as an extra step (but they still have to carry out hand hygiene after they take off the gloves).

Some patients feel very uncomfortable with all of these extra steps. Sometime people feel that that all these extra steps made them feel like they are dirty or dangerous or as if this was all their fault. No one wants to make you feel that way but the extra care is important to protect other patients and the nurses and doctors are thankful to you for your help and patience. You might carry a CPE that is doing you no harm but it could be very dangerous for some other patient on the ward who is vulnerable or fragile.

You should always tell your GP, public health nurse or any health practitioner that you have CPE so they can reduce the risk of spreading an infection to other patients.

I feel upset and I feel that I am treated like I am dirty and dangerous

Many people that carry the CPE bug and other "superbugs" are often very upset about all the special steps taken by nurses and doctors when taking care of them. Some patients say they "feel like a leper" or they are "stigmatised". It is easy to understand why you would feel that way – it is upsetting to be singled out and treated differently. The steps taken are never meant to make you feel bad. If you can put up with these extra steps as best you can it helps to protect other patients from catching CPE and the hospital and the staff are very thankful for your help.

Will I miss out on things or have delays to my treatment because I have CPE?

You should not have to suffer long delays because you carry CPE. If you are having surgery your surgery does not usually need to be put last in the day. No hospital or nursing home should refuse

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to admit you because you carry CPE. Everyone in the hospital and nursing home should know that it is not your fault you carry CPE. If the hospital or nursing home takes sensible steps when caring for you and if you can put up with the extra steps, then you are not a big risk to other people.

Why can't I mix with and share things with all the other patients in the hospital.

If you carry CPE the hospital will encourage you to keep away from other patients who do not carry CPE and will ask you not to share personal items. Some other patients on the ward may be very fragile and the CPE could make them very sick. Even something simple like sharing a newspaper could carry CPE to another patient. Some of this makes people feel very uncomfortable but no one is trying to blame you or make you feel bad. Your help makes a big difference to other patients. When you leave hospital we do not worry about this so much because CPE is probably less easy to spread outside of hospital and most people you meet outside of hospital are less fragile.

If I carry CPE who did I get it from?

It is usually impossible to say for sure where and when you got CPE. If you get CPE from someone today you will not notice anything, you will not feel sick. If you got the bug today and then got tested today the lab test would not find the CPE. It usually takes at least a week but it can take much longer from the time you pick up CPE to the time when it can be found on lab testing. If you carry CPE and you have been in a hospital in Ireland recently (and didn't travel outside of Ireland lately) then it is most likely (but not certain) that you got CPE in hospital.

Sometimes we have a fairly good idea that CPE was picked up in particular hospital or even a particular ward because of contact with someone with a similar bug but in most case we will not know exactly when CPE was picked up. We know that CPE sometimes spreads to new people in nursing homes. We also know also that it can spread between couples/partners and we know it is sometimes found in the environment where sewage flows into the sea but right now in Ireland it seems to spread mostly in hospitals.

I got CPE in the hospital but the hospital says there was no one else with CPE on the ward at the time?

The first thing to say is that it is very hard to be sure where and when someone picked up CPE because it can stay quietly in the gut and never make you sick or not make you sick for a long time. But sometimes we can say that we are fairly sure that the CPE was picked up during a stay in a particular hospital. If we have a patient that had a couple of tests for CPE and those tests did not find any CPE when they came into the hospital and then a swab taken later on while they are still in hospital tests positive for CPE then the patient probably got CPE in that hospital.

If you got CPE on a ward but there was no one else on the ward at the time who was known to have CPE that probably means that there was someone on the ward or in a ward nearby that had CPE but no one knew about it at the time. It is most likely the CPE got carried from that person to you on hands or items of equipment or because the CPE was on a surface that you touched for example a table top or a door handle.

Is there any way I can get rid of CPE?

CPE is a gut bug, once CPE settles into the gut it usually stays for a long time, antibiotics will not help you to get rid of CPE. In fact, antibiotics usually make CPE stay in the gut even longer because they kill off the normal gut bugs and make the gut a better home for the CPE. If you have

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good health and don't need to take any antibiotics for a long time that gives you the best chance of getting rid of CPE or at least having it shrink to very small numbers. Patients often ask if taking a probiotic will help clear CPE bugs; we do not have any evidence to date that they assist to clear superbugs.

If I need an antibiotic will the antibiotic work?

For most people carrying CPE who develop an infection (a skin infection, sore throat, chest infection or pneumonia) it is usually a normal bug and not the CPE that is causing the infection. If the infection is a viral infection or mild infection, it is usually best not to take antibiotics at all. If the infection is a skin infection or pneumonia and antibiotics are needed to treat the infection, then the usual antibiotics will usually work because mostly the bug causing the infection is not the CPE. In fact most common infections (sore throats, colds) are viral infections. Antibiotics do not help with viral infections and usually your immune system will clear up these infections. If you are on a special treatment that changes how your immune system works check with your doctor if you have any concerns and make sure to get all the immunisations recommended by your doctors especially the flu and pneumonia vaccines.

Most people with CPE never get a serious infection caused by the CPE. If you do go on to develop infection caused by the CPE bug, there are a couple of antibiotics that usually work but they can be complicated to use because they sometimes have side effects.

Should health care workers know if they are carrying CPE?

Carrying CPE in the gut does not make a health care worker sick. There is no treatment for clearing it but it may go away on its own. So if a health care worker finds out that they are carrying CPE they may worry about it but there is nothing to do about it. Provided they follow standard good practice in the clinical area there is no reason to believe that they are putting patients at risk.

In relation to their own health we do not have any information that says health care workers who look after people who carry CPE are more likely to get sick with CPE than anyone else. Even for health care workers with health problems like diabetes or high blood pressure we have no reason to believe that they are more like to get sick with CPE because of their work. We do not have any information that says the family members of health care workers are more likely to carry CPE or to get sick with CPE.

We can never rule out a risk of infection to a health care worker. Health care workers have contact with sick people. Some of those sick people have infections that can make a health care worker sick than CPE (influenza, tuberculosis, salmonella and so on). The risk of infection at work is are small (probably a lot smaller than driving to work) for most health care workers especially if they following **standard precautions** at work – most especially carrying out hand hygiene properly when needed during the day and before going home from work. Remember standard precautions is about protecting healthcare workers as well as protecting patients.

For more information on antimicrobial resistance and healthcare acquired infection or to view CPE guidance check www.hse.ie/hcai