

## Antibiotic Resistance Organisms

### Frequently Asked Questions for Patients and Caregivers Handout

#### 1. *What are antibiotic-resistant bacteria?*

You have had a positive culture for a bacterium that cannot be treated easily with antibiotics. This type of bacteria is commonly known as **antibiotic-resistant bacteria**. Antibiotic-resistant bacteria will not make you any sicker than more common bacteria and are sometimes treatable with a combination of antibiotics and/or with newer kinds of medications.

In many cases, the body's own immune system is able to attach antibiotic-resistant bacteria to either rid them from the body or to keep them "in check" by not allowing them to grow to numbers that might lead to illness.

Healthy people are in no danger of becoming sick from antibiotic-resistant bacteria because their bodies are very good at fighting off *any bacteria* that are not common to their own bodies. People with chronic conditions, weakened immune systems (decreased ability to fight off disease), on long-term antibiotics, or who have many or lengthy hospitalizations are at risk for becoming sick with *any* of the bacteria that are typically in their surroundings.

#### 2. *Do I need to worry about taking this bacteria home to my family?*

In most cases you do not need to use special precautions at home because most people have defenses that will not allow this bacteria to "take hold." If someone in your home has been on antibiotics for many weeks and also is immune-compromised, tell your health care provider, and he or she will tell you what you can do to prevent exposing this person to the resistant organism.

#### 3. *What precautions should family caregivers take for infected persons in their homes?*

Outside of healthcare settings, there is little risk of spreading these bacteria to others; therefore, healthy people are at low risk of getting infected. In the home, the following precautions should be followed:

- Caregivers should wash their hands with soap and water or alcohol-based hand rub after physical contact with the infected or colonized person.
- Towels used for drying hands after contact should be used only once.

- Disposable gloves should be worn if contact with body fluids is expected, and hands should be washed before putting on gloves and again after removing gloves.
- Do not share personal products that are in contact with the skin; for example: deodorant, razors, toothbrushes, towels, nail files, combs and brushes

#### **4. What are enterococci?**

Enterococci are bacteria that live in the bowel. Enterococci can go to other parts of the body and cause an infection. Vancomycin is an antibiotic used to treat infection caused by enterococci. If bacteria are resistant to vancomycin it means that vancomycin will not treat the infection. When this happens it is called “vancomycin-resistant enterococci” or VRE.

#### **5. Will I ever be rid of VRE?**

Over time your normal bowel organisms may take the place of VRE. You may no longer be isolated when stool or rectal swabs are negative for VRE.

#### **6. What is *Staphylococcus aureus*?**

*Staphylococcus aureus*, or *S. aureus*, is a bacteria usually found on a person's skin and mucous membranes. It may cause infections on broken skin or wounds. Methicillin and Vancomycin are antibiotics used to treat infections caused by *S. aureus*. If *S. aureus* is resistant to Methicillin, it is called MRSA. If *S. aureus* is resistant to Vancomycin, it is called VRSA. This means that the infection may be more difficult to treat. If someone has a VRSA or MRSA infection, other antibiotics may be used.

#### **7. Will I ever get rid of MRSA?**

Over time your normal skin organisms may take the place of MRSA or VRSA and you will no longer be placed in precautions.

Adapted from: Bennett, G. (2009). *Infection Prevention Manual for Ambulatory Care*.  
Washington, D.C.: Association for Professionals in Infection Control and Epidemiology