

StChristopher's

More than just a hospice

Extended spectrum beta-lactamases (ESBLs)

**INFORMATION FOR
PATIENTS, CARERS,
FAMILIES AND VISITORS**

What are ESBLs?

Extended spectrum beta-lactamases (ESBLs) are enzymes produced by some bacteria, which can break down certain types of antibiotics, preventing them from working.

Bacteria that are able to produce these enzymes are resistant to many of the antibiotics that are commonly prescribed to treat infections.

What illnesses do ESBL-producing bacteria cause?

The most common bacteria that produce these enzymes are *E. coli* and *Klebsiella* which are bacteria that can live in your bowel without you being unwell or showing any signs or symptoms of infection (this is referred to as colonisation).

These bacteria cause infection if they get into an area of the body where they are not normally found, such as the urinary tract. Urine infection is the most commonly diagnosed infection, but infection in the lungs (chest), wounds and in the blood can also occur. Infections caused by ESBL-producing bacteria can be more difficult to treat because of antibiotic resistance, as there are fewer effective antibiotics to use.

Can infections caused by ESBL-producing bacteria be treated?

Yes, despite being resistant to many antibiotics, there are still antibiotics available to treat infections should they occur. Your doctor will discuss your antibiotic treatment options with you. Antibiotic treatment is not generally recommended for people who are colonised and who do not have signs or symptoms of infection.

How can ESBL-producing bacteria be spread?

As with other bacteria, ESBL-producing bacteria can be spread from person-to-person on unwashed hands, on equipment that is contaminated and has not been sufficiently cleaned, or can be picked up from the environment. This can happen both in the community, in hospital and at the hospice.

Who is at risk?

There are a number of factors that make a person more likely to be colonised or infected with ESBL-producing bacteria. These include:

- having an underlying illness that makes a patient more susceptible to infection
- taking repeated courses of antibiotics
- a prolonged stay in hospital and
- having a urinary catheter.

What happens if I am found to be colonised or infected with ESBL-producing bacteria?

If you are found to be colonised or infected with ESBL-producing bacteria, you may be transferred to a single room. This is to minimise the risk to other patients on the ward who may be more vulnerable to the risk of infection.

St Christopher's staff will take extra precautions to prevent the spread of infection to other patients, for example, they may use disposable gloves and aprons. Staff members do not mind if you remind them to clean their hands.

Make sure you wash your hands after using the toilet and before you eat. Try not to touch wounds, catheters and other devices like drips.

If I am colonised or infected with ESBL-producing bacteria, how long might I have to stay in a single room?

This will vary from patient to patient. If you have symptoms or signs of infection or have an indwelling catheter or diarrhoea, you will usually remain in a single room for the duration of your stay.

It is not known how long colonisation with ESBL-producing bacteria persists but in most circumstances it is not necessary to retest or swab you to check whether these bacteria are still present.

Can I have visitors?

The risk to visitors and relatives is low if they are fit and well. If they have been unwell in the last 48 hours, please ask them not to visit until they are feeling better. Infants (babies under one year) do not have a fully developed immune system; therefore there is a small risk they may pick up an infection. It may be safer if they did not visit. Please discuss this with your St Christopher's doctor or nurse.

Prevention of infection rests mainly on good hand hygiene for you and your visitors. This includes cleaning hands before entering and leaving the ward, and before helping you to eat and drink.

Will I have to stay longer at St Christopher's?

You will not have to stay in the hospice until the ESBL infection has cleared. You will be able to go home when your condition allows, regardless of whether you still have ESBL-producing bacteria or not. This should not be a risk to your family or friends.

Normal personal hygiene (baths/showers) is sufficient, as is normal household cleaning. Clothes should be laundered as normal.

Infection prevention and control

Infection prevention and control is taken very seriously by St Christopher's and there are many guidelines and procedures in place to reduce the risks of acquiring or spreading infection. All staff work hard to try and ensure that healthcare-associated infections are reduced so that the risk to patients are minimised. If you have any worries, or require further information, please discuss these with our staff, or you can talk to your GP or Practice Nurse.

For more information, ask your St Christopher's doctor or nurse, your GP or practice nurse or visit one of the following websites:

NHS Choices

www.nhs.uk

Health Protection Agency

www.hpa.org.uk

Public Health England

www.gov.uk/government/organisations/public-health-england

It is really important for your care that the information you give us is as full and accurate as possible.

If you would like this information in a different format, such as audio tape, braille or large print, or in another language, please speak to the Communications Team on **020 8768 4500** or email **communications@stchristophers.org.uk**.

St Christopher's Hospice is a charity and our continued work is only made possible by your generous donations. Please consider making a one-off donation or becoming a regular donor. To find out more about how you can help, please visit **stchristophers.org.uk/donate**.

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