How can I stop the spread of Clostridium difficile?

It is very important that you wash your hands carefully with soap and water, particularly after using the toilet and before eating.

If you are having difficulty getting to a sink to wash your hands, please ask the staff to bring you a bowl of soap and water, or you can use hand wipes.

Can I go home if I have Clostridium difficile?

As soon as your general condition allows, you can go home. Your doctor will contact your GP so that they are aware that you have had Clostridium difficile, should you have diarrhoea again.

Two days after your diarrhoea stops and your bowels have returned to normal, you may return to your residential or nursing home.

If I need some more information, who can I speak to?

If the nurses looking after you are not able to answer all your questions, you can ask them to contact the infection control nurses who will be able to give you more information about Clostridium difficile.

Where can I get more information about Clostridium difficile?

- Health Protection Scotland
  www.hps.scot.nhs.uk
- The Health Protection Agency
  www.hpa.org.uk
- NHS Inform
  www.nhsinform.co.uk
- NHS Greater Glasgow and Clyde
  www.nhsggc.org.uk/infectioncontrol

You can get advice by contacting the local infection control team. Leaflets are available in other languages and in large print version from the following website:

www.nhsggc.org.uk/infectioncontrol

NHS Greater Glasgow and Clyde Senior Infection Control Management Team:

0141 211 2526

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What is Clostridium difficile?

Clostridium difficile are bacteria (germs) that can cause an infection in the bowel which may result in diarrhoea. Clostridium difficile can cause infection in hospital patients, especially the elderly. Infection usually occurs in patients who have received antibiotics.

How do I know that I have Clostridium difficile?

We will send a sample of diarrhoea to the laboratory and test it for Clostridium difficile. You may have watery diarrhoea and abdominal cramps which are common symptoms.

How did I get Clostridium difficile?

Bacteria (germs) are found on everyone, both inside and outside the body. Clostridium difficile may have been in your bowel before you came into hospital where it lived without doing you any harm (colonisation), or you may have acquired it since you came into hospital.

If you have been given antibiotics or other medication, the normal bacteria in your bowel may change, allowing Clostridium difficile to multiply and cause diarrhoea. Clostridium difficile can also spread on peoples’ hands and from contaminated equipment and a contaminated environment.

How do we treat Clostridium difficile?

If possible, we will give you a course of other antibiotics to treat the infection. Occasionally symptoms can return and we may give you other treatments.

What will happen to me?

If you have diarrhoea we may move you to a single room, give you your own commode, or allocate you a toilet to prevent it spreading to other patients. Staff will be wearing gloves and aprons when caring for you. If there are several patients with the same problem we may nurse you together in the ward. In addition to routine cleaning, two days after your diarrhoea stops and your bowels have returned to normal, staff will thoroughly clean your room or bed space.

Remember to drink plenty of fluids whilst you are having diarrhoea.

Will Clostridium difficile affect my family and friends?

Clostridium difficile is not usually a risk to healthy people including children. Visitors should wash their hands carefully with soap and water before leaving your room or bed bay. Visitors should also use the hand gel before entering and leaving the area. Gloves and aprons are not necessary for visitors. Only two visitors should visit at a time.

To prevent the spread of infection we would advise that visitors:
• do not bring in babies or infants
• do not move around the ward from patient to patient

If they are visiting someone else apart from you, it is better if they see you last.

If you have any questions please ask the ward staff or the infection control nurse.