

What do the abbreviations stand for?

MRSA (Meticillin-Resistant Staphylococcus Aureus) is a staphylococcus that is resistant to certain antibiotics, e.g. penicillin. In many of us, Staphylococci can reside in our nostrils, on our skin and in our mucous membranes. Sometimes these bacteria cause infections – in sores or abscesses for example.

VRE (Vancomycin-Resistant Enterococci) is a strain of enterococcus that is resistant to certain antibiotics. Enterococci are bacteria that normally reside in the intestine.

ESBL (Extended Spectrum Beta Lactamase) is an enzyme that could be produced by certain intestinal bacteria (such as E.coli bacteria). Bacteria that produce ESBL are resistant to certain antibiotics. E.coli bacteria normally reside in the intestine together with many other bacteria.

Common to VRE- and ESBL-producing intestinal bacteria is that they are often only carried in the intestine. As long as these bacteria remain in the intestine they are not noticeable. They can sometimes cause infections, most commonly in the urinary tract and in sores.

Why you are screened for antibiotic-resistant bacteria

MRSA, VRE, ESBL...

Which patients are screened for resistant bacteria?

In many countries resistant bacteria are more common than in Sweden. Patients who have been cared for at a hospital/clinic abroad during the last 10 years are therefore screened for bacteria designated MRSA, VRE and ESBL (see explanation on the last page).

Sometimes it could also be necessary to screen patients who have been cared for in a department together with another patient who is carrying resistant bacteria.

MRSA, VRE and ESBL are not diseases but designations for bacteria that have become more resistant to antibiotics, e.g. penicillin.

In order to receive the correct antibiotics when you have an infection, it is important to know if you are carrying resistant bacteria.

What does it mean for me as a patient to be screened for MRSA, VRE and ESBL?

While you are being screened for resistant bacteria you should preferably be cared for in a single room until you have received the results from the screening.

The screening results are often received after 3-5 days. If the results do not indicate the presence of resistant bacteria you can be cared for in the department without any restrictions.

If the screening indicates the presence of resistant bacteria you will receive more information from your doctor.

How can the spread of bacteria in a medical facility be avoided?

All staff should consistently follow "Basic hygiene routines". This means, among other things, washing hands with an antiseptic solution between every patient.

Remember

- Be particular about your hand hygiene, especially after using the toilet and before meals.
- Talk to the staff if you want to leave your room before you receive the screening results.
- Relatives are allowed to visit you as normal.

