



## Should I be tested ?

The advice from the HSE is that testing in the community is not recommended as it should not make a difference to your daily life. We will offer you testing while you are an inpatient or if you are coming back in for a procedure. We will organise testing so that we can see if you need a single room or different antibiotics.

### What does testing involve?

Testing for CPE in hospital usually means taking a rectal swab (a sample taken by inserting a small swab briefly just inside the back passage).

Another way to do this is to ask you to give a sample of faeces ('poo'). The testing for **CPE contacts** generally means four samples taken over at least, a four week period (samples taken with at least one week between samples). These samples will be tested in the laboratory.

The result from each test may be ready in a day or two but generally should not take more than a few working days. If CPE is not found in any of the four samples you are no longer identified as a CPE contact. There will no longer be any need for special infection control measures in your care when you are in the Hospital unless there are other reasons to do so.

The note can be taken off your hospital record and if you have a CPE contact card you can give it back to the Hospital for them to dispose of.

### If I test positive for CPE will I become sick?

CPE does no harm as long as it stays in the gut. CPE does not cause diarrhoea, vomiting or tummy upset.

The risk of a person carrying CPE developing a serious CPE infection, is very low. For the small number of people who do develop a serious CPE infection there are antibiotics that work and doctors use these antibiotics early if they know the patient is carrying CPE.

Sometimes, the Hospital does not know that a person is carrying CPE until after they have gone home. If we find out you are carrying CPE after you go home, we will write to your GP and Consultant who will then tell you.

### Where can I find more information?

If you would like any further information, please speak to a member of your healthcare team. For more information on antimicrobial resistance and healthcare acquired infection or to view CPE guidance check [www.hse.ie/hcai](http://www.hse.ie/hcai)

### How can I contact a member of the Infection Prevention & Control Team?

Tell the Clinical Nurse Manager, doctor or nurse looking after you if you would like to speak to a member of the Infection Prevention & Control Team and they will contact us.

We have made every possible effort to make sure that all the information provided in this leaflet is true, accurate, complete and up to date at the time of publication

**References** | HSE (Health Service Executive)  
HPSC (Health Protection Surveillance Centre)



Tallaght  
University  
Hospital

Ospidéal  
Ollscoile  
Thamhlachta

An Academic Partner of Trinity College Dublin

PATIENT  
INFORMATION  
LEAFLET

# Outbreak

## Carbapenemase producing Enterobacteriaceae (CPE)



# Outbreak of Carbapenamase Producing Enterobacterials (CPE)

Dear Patient,

People who need treatment in hospital are often more vulnerable to infection than most other people. This may be because they are already frail or the treatment they need has weakened their bodies defences.

At the moment there is an outbreak of CPE on this ward. An outbreak means that the bacteria that causes CPE has spread between at least two people on the ward.

## What is CPE?

The gut of every normal, healthy human contains bacteria (bugs) called enterobacteriales which normally do no harm. Occasionally these bugs escape their normal place and enter into other parts of the body and may cause harm i.e. into the bladder which can cause an infection or onto a wound can cause a skin infection.

CPE have developed a resistance to a powerful group of antibiotics called carbapenems.

Carbapenems are an important group of antibiotics that doctors often rely on to treat infections where treatment with other common antibiotics will not work.

It is important to know that most patients who get CPE will carry it but will not be infected by it. There are still some antibiotics that do work against CPE.

## Why am I being admitted to a ward where there is a bug?

This is the only ward/bed we have available. We are doing everything practical to stop the spread of CPE as quickly as possible to protect patients. We have put extra measures in place to control this outbreak

## Can CPE be harmful?

For most patients, CPE lives harmlessly in the bowel and does not cause infection. This is because the person's immune system controls the CPE in the bowel and prevents it from spreading elsewhere in the body.

Sometimes CPE can cause infections in patients, for example when they are very ill or while receiving chemotherapy. CPE can cause infections, such as kidney infections, wound infections or in severe cases, infection of the blood. Antibiotics are needed to treat CPE infection

## How do people get CPE?

Patients who have already taken lots of antibiotics are more at risk of developing CPE. The reason for this is that the more bugs are exposed to antibiotics, the more likely they will develop "resistance" to that antibiotic, so that antibiotic no longer works.

CPE is more common in certain countries than others – if you have been a patient in a hospital abroad in the past year, you need to let your doctor know.

If you have been admitted to an Irish hospital in the last year, please tell us so we can test you for CPE.

Patients, healthcare workers and visitors can be carriers of CPE. It can spread between patients through direct contact with each other or by touching items or surfaces that the person with CPE may have touched such as bed rails, toilets or equipment.

As patients in hospital are much more vulnerable to infection than patients in their own homes, special precautions are needed to prevent the spread of CPE between patients in hospital.

## What are the precautions for CPE?

Everyone caring for you must clean their hands. It is important that all our healthcare staff clean their hands **before** and **after** contact with patients.

In order to carry out hand hygiene properly our staff should be "**Bare Below the Elbow**" Sleeves rolled up to the elbow, No watches, jewellery, false nails, nail polish or rings (except a plain wedding band).

The most common way germs are spread is by people's hands. Please remember that even if hands look clean, they can carry germs. Hand hygiene is the single most important method of preventing the spread of infection.

Please do not go into the room or bed space of other patients or share personal items such as newspapers, food items, headphones etc..

## When should patients and visitors clean their hands?

- Before eating
- After using the toilet or commode
- Arrival to the Hospital and ward
- Before leaving your ward/area

Our staff have all been trained in hand hygiene techniques and will not be offended if you ask them if they have cleaned their hands.

It is also ok to tell a staff member if you see anything that is not clean.