Patient information - infection control

Clostridium difficile

("c-diff")

What is clostridium difficile?
Clostridium difficile bacteria are found in the bowel of people who are both healthy and unwell.
Approximately 3% of the population have harmless clostridium difficile in their bowel.
However, clostridium difficile can become harmful when present in large numbers. This usually happens when someone has taken antibiotics to treat another illness.
Some antibiotics can disturb the normal balance of bacteria in the gut, allowing clostridium difficile to multiply. Clostridium difficile produces toxins which affect the lining of the bowel, causing symptoms of diarrhoea. A diagnosis is confirmed by sending a stool sample to the laboratory for analysis.

Who is at risk of getting clostridium difficile infection?
- Patients who are elderly and who have underlying health diseases are most at risk. More than 80% of cases are in people over 65 years of age.
- Patients who have been treated with antibiotics
- Patients who have undergone gastrointestinal surgery
- Patients with an immune system which is not working properly, e.g. cancer patients

How is clostridium difficile treated?
If clostridium difficile is diagnosed, any antibiotics you are currently taking may have to be stopped and a specific antibiotic active against clostridium difficile will be prescribed to treat the infection.

How do you catch it?
A person is at an increased risk of getting clostridium difficile if they are taking or have recently taken certain antibiotics.

Symptoms of clostridium difficile infection include:
- Mild to severe diarrhoea—often watery
- Stomach cramps
- Fever
- Loss of appetite
- Nausea
- Abdominal pain or tenderness
Clostridium difficile produces spores which can live in the environment for a long time. These can be found on equipment, furniture or furnishings. A person may get clostridium difficile by ingesting the bacteria through contact with the contaminated environment.

As the spores live on surfaces, the risk of infection increases when people have diarrhoea, which can then be spread from person to person through poor hygiene. For example, through failing to wash hands correctly after using the toilet or after handling contaminated food.

**How can you help?**

You can help prevent the spread of infection by ensuring that you wash your hands thoroughly with soap and water (as in this instance alcohol hand rub is not effective), after using the bathroom, before preparing and eating food and when visiting hospitals and care homes.

If you are a patient, in order to protect yourself and other patients please tell your nurse or doctor if you have experienced any symptoms of diarrhoea. They can then provide you with a specimen pot to use the next time you have diarrhoea and can follow correct precautions, such as putting you in a room alone.

If you have been diagnosed with clostridium difficile, to help prevent the spread of infection it is important to wash all clothing, towels, sheets and bedding separately in the washing machine on the hottest cycle possible. You must also clean toilet seats, toilet bowls, taps and hand basins after use with hot water and general purpose detergent.

**How can I prevent the infection from recurring?**

When you are prescribed antibiotics to treat clostridium difficile, it is important that the entire course of antibiotics is completed as directed even if the diarrhoea has stopped; otherwise there is a risk that symptoms may re-occur. If you experience any difficulty with taking the antibiotics, it is important that you inform your doctor as soon as possible. The same applies if you continue to have diarrhoea either during or after you have completed your course of antibiotics.

**Clean environment**

We recognise the importance of keeping the environment clean and our domestic staff are dedicated to providing and maintaining a high standard of cleanliness, which is monitored regularly by our clinical staff. When patients are in isolation for infection control reasons, the domestic staff will perform rigorous cleaning of the isolation room to ensure a high standard of cleanliness and prevent the spread of infection.
What can visitors do to help?

Do not visit the hospital if you have diarrhoea or have had diarrhoea during the past 48 hours. If visiting a patient or relative who is being nursed in an isolation room, the nursing staff will provide you with guidance as to the correct method of hand hygiene using soap and water, assisting you with the use of apron or gloves if required. Do not sit or lie on the patient’s bed.

Further information can be found on the Public Health England website: [www.hpa.org.uk](http://www.hpa.org.uk/) or the NHS direct website: [www.nhsdirect.NHS.uk](http://www.nhsdirect.NHS.uk)

---

Patient advice and liaison service (PALS)

Phone: 020 7566 2324 or 020 7566 2325
Email: pals@moorfields.nhs.uk

Moorfields' PALS team provides confidential advice and support to help you sort out any concerns you may have about the care we provide, guiding you through the different services available at Moorfields. The PALS team can also advise you on how to make a complaint.

---

Your right to treatment within 18 weeks

Under the NHS constitution, all patients have the right to start their consultant-led treatment within 18 weeks of being referred by their GP. Moorfields is committed to fulfilling this right, but if you feel that we have failed to do so, please contact our patient advice and liaison service (PALS) who will be able to advise you further – see above for contact details. For more information about your rights under the NHS constitution, please visit [www.nhs.uk/choiceinthenhs](http://www.nhs.uk/choiceinthenhs).

---

Moorfields Eye Hospital NHS Foundation Trust
City Road, London EC1V 2PD
Phone: 020 7253 3411
www.moorfields.nhs.uk

Moorfields Direct telephone helpline
Phone: 020 7566 2345
Monday to Friday, 9am–9pm
Saturday, 9am–5pm
Information and advice on eye conditions and treatments from experienced ophthalmic-trained nurses.