

How is *C. difficile* spread?

C. difficile infections can spread very easily. There are some things you can do to reduce the risk of passing it on to others.

C. difficile bacteria produce spores (like seeds but so small you cannot see them) when a person has diarrhoea. They spread very easily in the environment and can get on to food and into the mouth and gut.

The spores can last in the environment for up to a year which is why thorough cleaning of the environment and equipment is important.

Alcohol hand gel is not effective against *C. difficile* and hand washing (with liquid soap and warm running water) to physically remove spores from hands is required.

If you are in hospital

If *C. difficile* infection is confirmed and you have diarrhoea you will be asked to move to a side room to help stop the spread to other patients. Staff will make sure they wash their hands thoroughly and will wear gloves and an apron when in the room caring for patients. You will remain in the single room with an en-suite facility or dedicated commode until discharged.

If a visitor is assisting with your personal care then gloves and an apron should also be worn. Visitors must wash their hands thoroughly with soap and water on leaving the room.

Personal laundry should be bagged and kept in your room for relatives/ friends to collect as soon as possible. It should be washed separately, with normal detergents on a hot wash (60 degrees or above)

Having *C. difficile* will not affect your discharge. As soon as you are well enough, you can be discharged. If you started a treatment for *C. difficile* in hospital you will need to complete it at home.

If you are at home

- Stay at home until at least 48 hours after your last episode of diarrhoea
- Wash your hands using soap and water
- Clean the toilet and area around it with disinfectant after each use
- Wash clothes and sheets with diarrhoea on separately from other washing at the highest possible temperature
- Do not share towels and flannels
- Do not take medication to stop diarrhoea because it can prevent the infection being cleared from your body.
- If you are not improving after five days of antibiotic treatment for *C. difficile* or deteriorate at any time contact your GP
- If your symptoms return after treatment finishes, contact your GP or healthcare professional.

Contact and other formats

If you require this leaflet in another format, please email: bnssg.communications@nhs.net

Clostridioides difficile

Symptoms and treatment



Clostridioides difficile (*C. difficile*) are bacteria that can cause diarrhoea. This often affects people who have been taking antibiotics. Symptoms can usually be treated with a different type of antibiotic.

What is *Clostridioides difficile*?

Clostridioides difficile (*C. difficile*) are a type of bacteria (germ) found in people's intestines (gut) and in the environment.

It lives harmlessly in the gut of about three in 100 healthy adults and as many as seven in 10 healthy babies. This is called 'colonisation'. The bacteria are there but causing no problems.

C. difficile is normally kept under control by 'good' bacteria in the gut. However, anything that disrupts or destroys these 'good' bacteria can allow the *C. difficile* to multiply and produce poisons (toxins). This is called infection which can cause unpleasant symptoms.

Who is at risk?

- People who have been treated with antibiotics especially long or multiple courses
- People who have had to stay in a healthcare setting such as a hospital or care home for a long time
- People who have certain underlying conditions, including inflammatory bowel disease (IBD), cancer or kidney disease
- People who are taking a medicine called a proton pump inhibitor (PPI) e.g. Omeprazole to reduce the amount of stomach acid they produce

- People with a weakened immune system
- People who are over 65 years old
- People who have had surgery on their digestive system
- People who have had a *C. difficile* infection in the past

What are the symptoms?

The most common symptoms are:

- Diarrhoea varying from mild to severe (this may have blood or pus in it)
- Abdominal (stomach) pain and tenderness
- Fever (high temperature)
- Loss of appetite
- Nausea (feeling sick)
- Dehydration (dry mouth, headaches, drowsiness, confusion, urinating less often than normal)
- Extreme inflammation of the bowel is possible, but this is rare

How is *C. difficile* diagnosed?

If a healthcare professional thinks you may have a *C. difficile* infection they will ask for your diarrhoea to be tested

A sample of diarrhoea is sent to the laboratory for testing. There are three possible results:

- negative – no colonisation or infection
- colonised – *C. difficile* found but not causing any disease/infection
- infected – *C. difficile* found and causing disease/infection

How long do symptoms last?

Symptoms can start to settle within a few days but for some people it may be longer.

How is it treated?

Stopping the antibiotics thought to be causing the infection, if possible – in mild cases, this might be the only treatment that is needed.

C. difficile can be treated with specific antibiotics. A 10-14 day course will normally be given.

Your symptoms should improve after a few days, but it may be 1 to 2 weeks before the infection clears up completely.

Carry on taking the antibiotics to complete the full course even if you feel better. If you stop your treatment early your symptoms could come back.

Rarely, severe infections may require surgery to remove a damaged section of the bowel.

It is important to drink enough fluids to stop dehydration. Medication to stop the diarrhoea is not prescribed as it may cause further irritation to the gut.

Most patients with *C. difficile* diarrhoea make a full recovery. There is a risk of the infection coming back in 20-30% of patients and a repeat course of treatment might be necessary.