



Clostridioides difficile

What is Clostridioides difficile?

Clostridioides difficile also referred to as C. difficile, is a bacterium (bug) that is present in the gut of around 3% of adults without causing a problem. The infection can occur following treatment with antibiotics.

Antibiotics disturb the normal bacteria that live in your gut and allows the C. difficile bacterium to multiply. It can produce toxins (like a poison) that affects the lining of the gut, which is the cause of the diarrhoea.

What symptoms might I have?

The symptoms range from mild diarrhoea for a few days, which stops on its own, to frequent offensive stools with mucus and sometimes blood. Additional symptoms of more severe infection include abdominal pain, fever, loss of appetite and sickness which can last from a few days to several weeks.

Who is at risk?

C.difficile mostly affects people who are unwell, but it can also affect anyone who has been:

- Taking antibiotics
- In hospital, especially those over the age of 65
- Diagnosed with a bowel disorder or has had surgery on the stomach and/or bowel
- Treated for cancer or whose immune system is affected
- Taking medications that regulate stomach acids known as proton pump inhibitors such as Omeprazole

How does it spread?

The bacterium produces spores that can survive in the environment for long periods. Spores can be picked up on people's hands and infect other people by entering the body through the mouth.

How was it diagnosed?

A sample of your stool was sent to the laboratory to confirm whether you have Clostridioides difficile infection.

How is it treated?

Where possible any antibiotics you are taking will be stopped and your symptoms may stop without further treatment. However, you may be given different antibiotics that can help treat the infection. It is very important to finish the whole course of antibiotics even if you are feeling better, as there is about a 20%-30% chance that the Clostridioides infection may return.

Remember to drink plenty of fluids to replace the fluids you are losing.

How can spread be prevented?

You will be moved to a single room with your own toilet to prevent the bug spreading on the ward and for your own privacy.

The most important method of preventing spread is hand hygiene. It is vital that you wash your hands after you have been to the toilet and before eating. You should also make sure you wash any fruit before eating it and do not leave any food uncovered.

Anyone who comes into contact with you or your environment must wash their hands. Staff will wear gloves and aprons when caring for you. Any soiled laundry must be placed in a bag and taken home to be laundered separately from other items at as high a temperature as possible for the fabric.

Alcohol hand gel is not effective at killing Clostridioides difficile and must not be used to clean hands.

Will it affect my family or other visitors?

It is not a risk to healthy people. Ask a member



Clostridioides Difficile

of the ward staff for advice if you are worried. We ask that they wash their hands before they leave your room and don't mix with other patients on the ward. Visitors do not have to wear gloves and aprons unless they are helping you with your care (e.g., personal hygiene). If they are visiting someone else apart from you, it is best if they see them first.

What will happen when I go home?

You will not have to stay in hospital any longer than necessary; you will be allowed home when medically fit.

What will happen when I go home?

Not all precautions taken in hospital are necessary at home. However, it is advisable for everyone to wash their hands before handling food, before eating and after using the toilet and handling soiled linen/clothing. Any soiled items of clothing should be laundered separately at as high a temperature as possible. There is a possibility that the infection and your symptoms may return within the first 3 weeks following treatment. If symptoms return you should immediately inform your GP and let them know you have previously been treated for *Clostridioides difficile*.

Further information

If you have further questions, please speak to a member of the ward team or ask them to contact the Infection Prevention and Control team.