

# MRSA

Neonatal Unit



**Information for parents**

Neonatology



**PROUD TO MAKE A DIFFERENCE**

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



## Introduction

As part of on-going screening tests during this admission we have found that your baby is either 'colonised' or 'infected' with MRSA. In a neonatal unit any infection, including MRSA, is taken seriously as the babies are often small, sick and are less able to fight infection. It must already be a worrying time for you to have a baby in the neonatal unit and we know that this will be an extra concern for you.

### This leaflet will try to:

- Explain what you may already have been told.
- Answer questions that you may have and prompt you to ask more.
- Reassure you and involve you in your baby's care.

### How did you find out my baby has MRSA?

- All babies are routinely screened to detect MRSA and other bacteria on admission to the neonatal unit, and at weekly intervals.
- We have done this by swabbing your baby's skin in different places. Screening is not uncomfortable for your baby.

### What is MRSA?

- MRSA is short for **M**eticillin **R**esistant **S**taphylococcus **A**ureus', pronounced as 'stafilococcus orius'. This is often shortened to Staph. aureus.
- MRSA is a type of Staph. aureus that has become resistant to some antibiotics, including Meticillin, but there are other antibiotics that can be used to treat MRSA.
- Staph. aureus is a common type of bacteria that is found on the skin of many healthy people. This is quite normal and does not necessarily mean that the person affected is or will become unwell.

- When Staph. aureus infections do occur, they usually affect the skin causing spots, boils and infected cuts or wounds.

## **How does MRSA spread?**

- It spreads from patient to patient, by staff, parents and visitors' hands that have not been cleaned properly, by equipment that has been contaminated, and possibly through the environment.
- It can also be found outside hospitals in places such as gyms, and is also spread by touch.

## **How did my baby get MRSA?**

There are 2 ways:

- Your baby has got it from a family member who is a carrier, usually with no ill effects.
- Your baby may have acquired MRSA while they are in hospital.

## **What treatment will my baby need?**

This will depend on whether your baby is 'colonised' or 'infected' with MRSA.

## **What is 'colonisation' with MRSA?**

- Colonisation means that the MRSA is carried in the nose and/or the skin and is causing no harm or symptoms.

## **What is the treatment for colonisation?**

- Cream will be put into your baby's nose and some babies will have a body wash depending on factors such as their weight and age. These are known as 'topical treatments'.
- Topical treatments reduce the amount of MRSA on the body surface/skin which reduces the likelihood of an infection happening.
- Topical treatments usually last for 5 days.
- 2 days after the treatment has stopped your baby will be re-swabbed.

## **How effective is the topical treatment?**

Many babies only need one course of treatment, but sometimes further courses of body washes may be needed.

## **Are there any side effects or risks?**

Occasionally, the body wash may cause skin irritation or a rash. There are other washes available to use should this occur.

## **What is infection with MRSA?**

- Infection with MRSA is very rare.
- This means that your baby has symptoms of infection such as an unstable temperature, or has become unwell.
- The MRSA bacteria may have been found in your baby's blood - this is called a 'bacteraemia'.

## **What is the treatment for infection due to MRSA?**

- Your baby will be given antibiotics that will help fight the infection.
- Topical treatments may also be used.

Preventing the spread of MRSA is also very important; this can be achieved by good hand hygiene.

## **What can I do to help my baby?**

- Please use the alcohol hand-rub before and after coming into the unit, and before touching your baby. It has been shown that 99% of bacteria are killed after 30 seconds of good use of alcohol hand-rub.
- Please wash your hands with soap and water upon entering your baby's room.
- Wash your hands after you have been to the toilet and after changing your baby's nappy.
- The Infection Prevention and Control team recommend that you are tested for MRSA, if your baby tests positive for MRSA in the first 48 hours of life. This is performed by a swab of your nose.
- It is ok to ask or remind staff politely to clean their hands before they touch your baby.
- Keep the number of visitors to just a few, especially if your baby is small and needing intensive care. Small sick babies are much more prone to infection.
- Ensure that your visitors clean their hands properly, and please don't let them touch your baby while in intensive care.

## **Will my baby's care change?**

Yes, the care your baby receives will change in the following ways:

- Your baby will be nursed in a special way to reduce the risk of cross infection as much as we can.
- Staff will wear gloves and a white apron when providing care for your baby as part of our routine infection prevention. If your baby has tested positively for MRSA, staff will wear gloves and a yellow apron that will be located on a trolley provided for your baby's individual use. This is to help prevent the spread of the MRSA.
- Everybody must use the highest standards of hand hygiene, and should be reminded if they are not doing so.
- Your baby's progress will be monitored closely by the neonatal and the hospital Infection Prevention and Control teams.

## **Will the MRSA go away?**

In some cases the MRSA will disappear with little or no treatment, but in other cases it may be difficult to get rid of, and your baby could remain 'colonised' even after going home.

- We will take regular skin swabs from your baby during their time in hospital, and they may need further topical treatments.
- We will keep you up to date with screening results and with the plan of care for your baby.

## **My baby is nearly ready to go home, do I need to do anything special?**

- Once at home, normal hygiene should continue.
- Continue with good hand-washing. We advise this for all parents anyway.

- The neonatal staff will inform your family doctor, health visitor, community neonatal nurse and midwife about your baby's MRSA history.

## **Do I need to tell anybody?**

If your baby needs to come back to a hospital please tell the staff caring for your baby about the MRSA, particularly if your baby is still testing positive.

## **How do I get more information?**

Please speak to the staff caring for your baby; we can also arrange for you to talk to a member of the hospital Infection Prevention and Control team.



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