

Client: DFW Hospital Council Foundation

Date: 8/6/2014

Project: C. Diff FAQs / Tips

Author: Mark Brinkerhoff

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People getting medical care can catch serious infections called health care-associated infections (HAIs). While most types of HAIs are declining, one – caused by the germ *Clostridium difficile*, or C. diff – remains at historically high levels.

#### *What is C. diff?*

*Clostridium difficile* diarrhea, is a type of infectious diarrhea caused by the bacteria *Clostridium difficile*. C. *difficile* causes diarrhea linked to more than 14,000 American deaths each year. In addition, C. *difficile* infections cost at least \$1 billion in extra health care costs annually.

#### *How does one get C. diff?*

When a person takes antibiotics, good germs that protect against infection are destroyed for several months. During this time, patients can get sick from C. *difficile* picked up from contaminated surfaces or spread from a health care provider's hands. (About 25% of C. *difficile* infections first show symptoms in hospital patients; 75% first show in nursing home patients or in people recently cared for in doctors' offices and clinics.)

#### *How is C. diff spread?*

C. *difficile* germs move with patients from one health care facility to another, infecting other patients. Half of all hospital patients with C. *difficile* infections have the infection when admitted and may spread it within the facility. The most dangerous source of spread to others is patients with diarrhea. Unnecessary antibiotic use in patients at one facility may increase the spread of C. *difficile* in another facility when patients transfer. (When a patient transfers, health care providers are not always told that the patient has or recently had a C. *difficile* infection, so they may not take the right actions to prevent spread.)

#### *How serious is C. diff?*

C. *difficile* infections are linked to more than 14,000 deaths in the U.S. each year. Deaths related to C. *difficile* increased 400% between 2000 and 2007, due in part to a stronger germ strain.

#### *Who is most at risk of catching C. diff?*

Those most at risk are people, especially older adults, who take antibiotics and also get medical care. (Most C. *difficile* infections are connected with receiving medical care. Infection risk generally increases with age; children are at lower risk.)

#### *Can C. difficile infections be prevented?*

Yes, early results from hospital prevention projects show 20% fewer C. *difficile* infections in less than two years with infection prevention and control measures. (For example, England decreased C. *difficile* infection rates in hospitals by more than half in three years by using infection control recommendations and more careful antibiotic use.)

## C. DIFF TIPS

For patients:

- Take antibiotics only as prescribed by your doctor. Antibiotics can be lifesaving medicines.
- Tell your doctor if you have been on antibiotics and get diarrhea within a few months.
- Wash your hands after using the bathroom.
- Try to use a separate bathroom if you have diarrhea, or be sure the bathroom is cleaned well if someone with diarrhea has used it.

For doctors and nurses:

- Prescribe antibiotics carefully. Once culture results are available, check whether the prescribed antibiotics are correct and necessary.
- Order a C. difficile test (preferably a nucleic acid test) if the patient has had 3 or more unformed stools within 24 hours.
- Be aware of infection rates in your facility or practice, and follow infection control recommendations with every patient. This includes isolating patients who test positive for C. difficile infection and wearing gloves and gowns to treat them.

*The enclosed material was prepared and assembled by DFWHC Foundation Hospital Engagement Network, under contract **with the Centers for Medicare and Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services, Partnership for Patients Initiative. Contract #HHSM-500-2012-0025** Hospital Engagement Network*

Media Contact:

Chris Wilson

DFWHC

(972) 719-4900

[chrisw@dfwhc.org](mailto:chrisw@dfwhc.org)