

What can you do to prevent the spread of *Clostridioides difficile*?

Effective hand hygiene is the single most effective action to reduce the risk of *Clostridioides difficile* infection. This involves washing hands with water and soap or a soap solution, either non-antimicrobial or antimicrobial. This needs to be completed frequently and thoroughly to reduce risk of spreading bacteria. It is particularly important that you perform hand hygiene before touching your face, eating or handling food, and after going to the toilet.

If you are a visitor or a carer

There are a range of actions visitors and carers can take to minimise the risk of giving a patient an infection or catching an infection from a healthcare facility. For example:

- Do not visit someone in a healthcare facility if you feel unwell, have a cold, have been vomiting or have had diarrhea recently. Wait until you feel better.
- Practice good hand hygiene by washing your hands well with soap and water:
 - after entering a healthcare facility and when you leave the facility
 - before touching a patient or their food
 - after you leave a patient's room.
- Be careful not to touch dressings, drips or other equipment around the hospital bed.
- Avoid bringing a large number of visitors at one time to visit someone. Always check visiting arrangements with the healthcare workers.
- Do not use the patient's toilet or bathroom, use the visitor facilities.
- You may be asked to wear gloves and an apron or gown when visiting a patient in a healthcare facility. Follow instructions provided by healthcare workers about any extra precautions that may be needed.

Do you need to do anything different when you go home?

If you have had a *Clostridioides difficile* infection while you were in a healthcare facility you should continue to practice good hand hygiene when you return home. You should stay home from work and limit your contact with other people for at least 48 hours after diarrhoea has stopped.

Usually no other precautions will need to be taken. Your healthcare worker will let you know if anything else is required before you are discharged.

You may be discharged before your course of antibiotics is finished. It is important to finish the whole course of antibiotics, even if you are feeling better.

How can I find out more about *Clostridioides difficile*?

You, your family or your carer can get further information from your healthcare worker or from the resources listed below.

For more information:

This brochure is based on the *Australian Guidelines for the Prevention and Control of Infection in Healthcare*.

For further information visit:
www.nhmrc.gov.au
www.safetyandquality.gov.au

Contact:

National Health and Medical Research Council
GPO Box 1421, Canberra ACT 2601
P: 13 000 NHMRC (13 000 64672)
P: +61 2 6217 9000 for international callers.
Please let us know if you need an interpreter.
E: nhmrc@nhmrc.gov.au

Publication Reference: Australian Guidelines for the Prevention and Control of Infection in Healthcare, Canberra: National Health and Medical Research Council (2019).



Australian Government

National Health and Medical Research Council

Australian Commission on Safety and Quality in Health Care

Clostridioides difficile infection

previously known as
Clostridium difficile infection

Healthcare-Associated Infections
Information for patients



AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE

What is *Clostridioides difficile*?

Clostridioides difficile, also known as *C.difficile* or *C.diff*, is bacteria that can live in your gut. It does not cause infection or disease on its own and is found in healthy people.

An infection with this bacteria occurs when people's normal gut bacteria have been changed by antibiotic treatment or by other medications. This change means that *Clostridioides difficile* bacteria may be able to multiply and produce toxins that cause illness, such as diarrhoea and severe inflammation of the bowel. This is when you have developed a *Clostridioides difficile* infection.

Some people may be 'colonised' with *Clostridioides difficile* and have no symptomatic illness.

Who is at risk of *Clostridioides difficile* infection?

Patients who require long periods of treatment in a healthcare facility are most at risk of infection. The risk of infection grows when bathrooms and toilets are shared with other patients who are colonised or infected with this bacteria.

The risk of infection risk increases if you have:

- been treated with antibiotics
- undergone gastrointestinal procedures or surgery
- had a long stay in a healthcare facility or a nursing home
- a weakened immune system, such as patients in intensive care units, or in cancer or transplant wards.

It is important to tell your doctor if you develop diarrhoea whilst taking antibiotics.

How does *Clostridioides difficile* infection spread?

In healthcare facilities, *Clostridioides difficile* may be passed from person to person by the hands of healthcare workers and caregivers after they have come in contact with other people colonised or infected with this bacteria. It can also be spread to people if they have touched surfaces that are contaminated with *Clostridioides difficile*.

Are you infectious?

If you have a *Clostridioides difficile* infection, you are infectious. This means you can spread the illness to others. *Clostridioides difficile* spreads from person to person through spores that can survive on surfaces for a long time.

It is very important to wash your hands thoroughly with soap and water after going to the toilet. You will be considered 'non-infectious' when you have not had diarrhoea for at least 48 hours.

What are the main symptoms of a *Clostridioides difficile* infection?

Clinical symptoms include:

- watery diarrhoea
- fever
- loss of appetite
- nausea
- abdominal pain, bloating or tenderness.

How is a *Clostridioides difficile* infection diagnosed?

Clostridioides difficile infection is diagnosed from stool (faeces) samples. A stool sample is sent to the laboratory, where staff can test it for the organism and its toxins.

How is *Clostridioides difficile* infection treated?

Your doctor will discuss with you what treatment is required. If you developed *Clostridioides difficile* infection while taking antibiotics, and only have mild diarrhoea, then you may be advised to stop the antibiotics. This may be enough to relieve the symptoms and for the infection to resolve within 2-3 days.

An infection with severe diarrhoea will require treatment in hospital with specific antibiotics until your symptoms resolve. Occasionally, a *Clostridioides difficile* infection may come back. If your symptoms return after the treatment, tell your doctor.

What will happen when you are in a healthcare facility?

Healthcare facilities also play an important role in preventing *Clostridioides difficile* infections by:

- using antibiotics properly
- ensuring that their staff practice hand hygiene
- identifying and isolating patients who are colonised or infected with *Clostridioides difficile*
- using personal protective equipment (PPE), such as gloves and an apron or gowns, when providing personal care for patients with *Clostridioides difficile*
- following thorough cleaning procedures.

