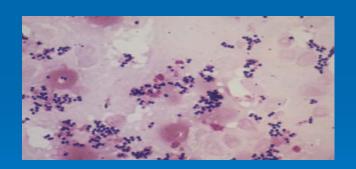
# Community Associated MRSA: Prevention and Control in Community Settings



March, 2008

#### Disclaimer

The reference to brand names in this presentation does not constitute endorsement by the Wisconsin Division of Public Health

#### Who Gets CA MRSA

- Anybody--but these groups have a higher rate:
  - Children
  - Military recruits
  - Prisoners
  - Athletes

#### Risk Factors

- > Close skin to skin contact
- > Crowded conditions
- Compromised skin
- > Contaminated items
- Cleanliness (lack of)

# How CA MRSA is Spread

- Skin to skin contact with infected person
- 2. Contact with a carrier
- 3. Contact with contaminated personal items

#### Preventing Spread of CA MRSA

- Hand and personal hygiene
- Prevention of injuries to skin
- Early detection of infections
- Appropriate treatment
- > Exclusion
- Cleaning/disinfection
- Management of outbreaks

# Hygiene

- Hand hygiene
- Regular showers
- No sharing of personal items (razors, towels, equipment, uniforms, water bottles)
- Do not touch others' wounds
- Liquid soap dispensers
- Alcohol gel



#### Wound care

- Wash, cover and contain with clean, dry dressings
- Wear gloves and wash hands after touching wounds or dressing
- Place bandages/dressings that are saturated with wound drainage in red biohazard bags or sealed plastic bags

# Prevention of skin injuries

- Protective gear
- Inspect playing fields for objects that can cause cuts and abrasions
- > Treatment of injuries
  - Clean with soap and water
  - Cover with a bandage or clean, dry dressing

#### Early detection

- > Identify athletes with skin infections
  - Provide education at team meetings
    - Teach athletes to watch for signs/symptoms of infection
    - Instruct to report skin infections
  - Coaches, trainers perform screenings
  - Screen contacts of infected persons

#### Skin examinations

- > When
  - Periodically
  - During outbreaks of skin infections
  - Before athletic events
- > Where
  - Private area with good lighting
- > How
  - Ask athlete if he/she has skin problems
  - Systematic exam from head to toe

#### Skin examinations

http://www.health.state.mn.us/divs/idepc/dtopics/athlete/skinhcp.pdf

# Signs/symptoms of staph infections

- > Pustules, boils, abscesses
- > Redness, swelling
- > Pain
- > Pus, drainage
- > Appearance of "spider bite"





#### FIGURE



This 2005 photograph shows a cutaneous abscess, located on the hip of a prison inmate, which has begun to drain. The abscess was caused by methicillin-resistant Staphylococcus aureus.





# Appropriate treatment

- Abscesses and boils are usually drained
- > Purulent material is cultured
- > Antibiotics may or may not be prescribed
  - Clindamycin
  - Trimethoprim sulfamethoxazole
  - tetracyclines

#### **Exclude from activities**

- > When to exclude
  - Appropriate hand/personal hygiene cannot be assured
  - Wounds cannot be kept covered/wound drainage contained
- Persons with active infections or open wounds should be excluded from whirlpool use, swimming pools

- Wrestling mats
- > Athletic equipment
- > Uniforms, towels
- > Locker room surfaces
- > Whirlpools

- > Establish regular cleaning schedule
- Remove soil first by cleaning, then disinfect
- Change water, mops, cleaning cloths when dirty
- > Clean from cleanest surfaces to dirtiest
- Follow disinfectant manufacturer's directions for contact time

- Wrestling and gymnastic mats
  - Disinfect daily and when visibly soiled
  - Use low-grade disinfectant
    - example: Lysol™ quaternary ammonium disinfectant
    - Allow to air dry

- Athletic equipment (helmets, shoulder pads, other non-washable gear)
  - Clean/disinfect before use by others
  - Check with manufacturer to determine safest disinfectant for equipment
  - Commercial products/systems
    - Example: Esporta http://www.esporta.ca/products/Esporta\_detergents. htm

- Wash uniforms, towels, and other washable equipment between use
  - Launder in hot water (140° F) and detergent or warm water and bleach (1/2 cup per large load)
  - Dry in hot dryer (180° F) until completely dry

- > Locker room surfaces
  - Benches, showers, floors, toilets, sinks, weight room equipment
  - Clean/disinfect regularly
  - Locker rooms should have easy to clean surfaces such as tile on floors instead of carpeting

- > Whirlpools
  - Whirlpool: 3.0 ppm minimum free chlorine residual or 7.0 ppm total bromine
  - Whirlpool with stabilizer: 4.0 ppm minimum free chlorine residual
  - Drain and disinfect surfaces after each use
  - Clean and disinfect jets routinely
  - Prohibit persons with open sores from using

#### Disinfectants

- Should be EPA registered
  - http://www.epa.gov/oppad001/chemregind ex.htm
- Can also use 1:10 or 1:100 bleach solution
- Use all disinfectants at correct strength and for contact time specified by manufacturer

#### Disinfectants

- Low grade disinfectants used for surfaces not soiled with blood or body fluids (EPA list H)
  - Lysol
  - SC Johnson phenolic disinfectant
  - Sani-cloth wipes
  - 1:100 bleach solution made up daily

#### **Disinfectants**

- For blood/other body fluid clean up (EPA list E)
  - Virex TB or 256
  - Dispatch
  - Cavicide, Caviwipes
  - Citrix
  - 1:10 bleach solution

Disinfectants on both lists are effective against MRSA

# Managing outbreaks

- Outbreak: three or more cases of confirmed MRSA among close contacts
- > Contact local health department
- > Begin active screening for more cases
- Distribute informational materials to parents, students, staff

#### Gymnasiums/health clubs/spas

- Hand hygiene
- Liquid soap dispensers/alcohol gel
- Air dryers or disposable paper towels
- Protective clothing
- Cover wounds—do not visit if cannot
- > Shower after exercise
- Do not share items
- Clean equipment surfaces
- Launder towels/linens and dry in hot dryer

#### Day care centers

- > Hand hygiene
- Standard precautions—wear gloves when touching someone's wounds
- Cover lesions/wounds
- Exclude attendees/staff who cannot contain wound drainage
- Routine cleaning of environment/shared items

#### Households

- Hand and personal hygiene
- > Cover wounds
- Gloving/hand washing when doing wound care
- > Do not touch others' wounds
- Do not share towels, personal items
- Launder contaminated items in hot water and dry in hot dryer
- Clean areas contaminated with wound drainage
- > Dispose of soiled dressings in sealed bag

# Us vs. MRSA



# Keep skin clean













# Keep skin intact



















#### Moisturize and maintain proper pH







#### Do not share personal items









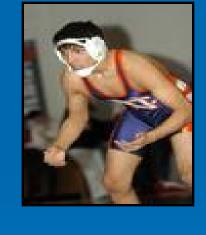




# Keep environment clean











#### Main Messages about CA MRSA

- Most infections are mild skin infections
- > Infections are treatable
- Risk of infection can be reduced by keeping skin clean and healthy

#### CA MRSA

Guidelines for Clinical Management
CA MRSA Patient Pamphlet
Guidelines for Controlling Transmission
among Students and Athletes

http://dhfs.wisconsin.gov/communicable/Communicable/HlthProvider.htm

Gwen Borlaug, CIC, MPH
Division of Public Health
1 West Wilson Street Room 318
Madison, WI 53702
608-267-7711
borlagm@dhfs.state.wi.us