

Staphylococcus aureus decolonisation

What is Staphylococcus aureus?

Staphylococcus aureus, also known as Staph aureus, is a common bacteria that lives in the nose, throat and on the skin of about one in every four people.

Usually people carry these bacteria without it causing any harm – this is called colonisation.

Sometimes *Staph aureus* becomes resistant to commonly used antibiotics (meaning these antibiotics will not work anymore).

The name of one of these antibiotics is methicillin and these resistant bacteria are known as methicillin resistant *Staph aureus* or MRSA.

Why is Staph aureus important?

People who are colonised with *Staph aureus* are more likely to develop wound infections after surgery or other infections especially if they have a weakened immune system.

The risk of this happening can be decreased if the amount of *Staph aureus* in the nose and on the skin is reduced.

This is achieved by completing a decolonisation treatment.

What is decolonisation?

Decolonisation is a treatment to reduce the amount of *Staph aureus* on the skin. This works for both *Staph aureus* and MRSA.

Discuss with your treating team if you or your child have any skin disorders (for example, scabies, eczema or psoriasis) as the treatments may exacerbate the skin condition or not work as expected.

Who requires decolonisation for *Staph aureus*?

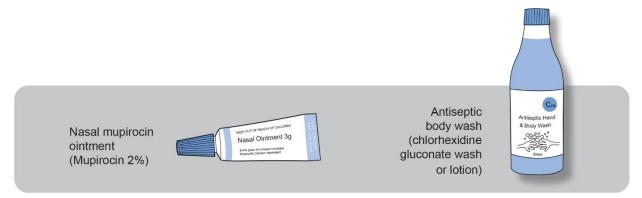
- Patients undergoing certain surgical procedures (e.g. cardiac or orthopaedic procedures).
- Patients being treated for leukaemia or other oncology conditions.
- Patients who are having a central venous access device (CVAD) inserted (e.g. Implanted infusaport or PICC line).
- Patients and family contacts of patients with recurrent or severe Staph aureus skin or soft tissue infections. If decolonisation is taking place after an infection it should



commence once the antibiotic course has been completed to ensure the infection has been treated and decolonisation is most effective.

What treatment is given to people colonised with *Staph aureus*?

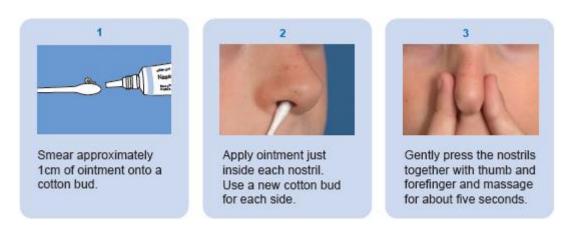
Two products are used on the body for **FIVE days** to help reduce *Staph aureus*.



Nasal ointment

Wash your hands with soap and water or a hand sanitiser gel and then apply just inside each nostril **TWO times a day for FIVE days**.

Other nasal sprays or nasal ointments should not be used during this treatment course.



Body wash

Apply **ONCE** a day for **FIVE** days when bathing or showering. A clean towel must be used for each person each day.

- Children less than 3 months old will receive chlorhexidine 1% body lotion:
 - Apply to dry skin a thin layer of the lotion on the head and body (but not the face) ONCE daily for FIVE days.
 - The lotion should be left on for 30 seconds then washed off. Do NOT wash with any other soap or cleanser after this. Dry the infant with a freshly washed clean and dry towel.

• Children 3 months of age and older will receive chlorhexidine 2% hand and body wash:

- Wet the whole body and apply a thin layer of the wash over the entire body (but not the face) ONCE daily for FIVE days paying particular attention to hairy areas of the body and creased areas of the skin.
- o The wash should be left on for **two minutes** then washed off.
- Do NOT wash with any other soap or cleanser after this and do not wash the hair with shampoo the days the hair is treated. Dry with a freshly washed clean and dry towel.
- Shampoo hair with chlorhexidine wash on days 1, 3 and 5 of the course.
- Your normal conditioner may be used after shampooing with chlorhexidine.

Wet the whole body with water using a face cloth or in the shower or bath.



- Apply the body wash to the whole body taking special care of areas such as the neck, armpits, groin, genital areas and between skin folds and hairy areas.
- the soap will not lather up much, this is OK.
- Work from the top down and wash the anal area last.



- Once the whole body has been covered with the body wash,leave for 2 minutes to kill the bacteria.
- After 2 minutes rinse off the body wash.



Wash hair with the body wash on days 1,3, and 5 during the five day treatment. (conditioner can be used afterwards as normal)



What if I can't use the chlorhexidine products?

There are alternative products available if a patient has an allergy or adverse reaction to chlorhexidine.

- Children ≥3 months of age can use Triclosan 1% wash in place of chlorhexidine wash in conjunction with mupirocin nasal ointment.
- In children of all ages, **bleach baths** can be used THREE times a week on days 1, 3 and 5 in place of chlorhexidine wash or lotion in conjunction with mupirocin nasal ointment.

Pour a quarter of a cup (60mL) of unscented household bleach (sodium hypochlorite 6%) into a standard household bath that is approximately a quarter full of warm water.

For infants who bathe in smaller baths, dilute approximately 12mL of bleach with every 10L of warm water.

Ensure water is mixed thoroughly before bathing. Soak up to the neck in bathwater for 15 minutes.

Avoid contact with the face and eyes. The skin is likely to become dry during this treatment; a moisturiser may be applied if required.

In addition to the above treatment:

- The patient's house should be cleaned well, vacuuming floors and soft furnishings and wiping over all frequently touched surfaces in the home on day 2 of decolonisation and after completion of treatment on day 5.
- Clothes, underwear, pyjamas, bedlinen and towels should be washed using a hot wash cycle and drying in the sun where possible on day 2 of decolonisation and after completion of treatment on day 5.
- Towels should not be shared amongst members of the family and should be washed in hot water. A clean towel should be used on each day of treatment.
- All patients and family members undergoing decolonisation should replace their toothbrush and any razors for shaving at the start of the treatment.

Patients with removable orthodontic devices or dentures should soak the device overnight in a denture cleaning product, for example Steradent® or Polident®.

<u>Please note</u>: It is important to adhere to the time frame specified unless directed otherwise.





This document can be made available in alternative formats on request for a person with a disability.

Child and Adolescent Health Service

15 Hospital Avenue, Nedlands, WA, 6009. Telephone: (08) 6456 2222

Produced by: Pharmacy Ref: 1369 © CAHS 2021

Disclaimer: This publication is for general education and information purposes. Contact a qualified healthcare professional for any medical advice needed.

© State of Western Australia, Child and Adolescent Health Service.

As a reminder please tick each day once completed:

| Day 1 | Day 2 | Day 3 | Day 4 | Day 5 |
|--|---|--|---|---|
| mupirocin nasal ointment □ morning □ night | mupirocin nasal ointment morning night | mupirocin nasal ointment in morning in night | mupirocin nasal ointment morning night | mupirocin nasal ointment morning night |
| ☐ Chlorhexidine body wash | ☐ Chlorhexidine body wash | ☐ Chlorhexidine body wash | ☐ Chlorhexidine body wash | ☐ Chlorhexidine body wash |
| □ Chlorhexidine hair shampoo | | □ Chlorhexidine hair shampoo | | Chlorhexidine hair shampoo |