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Information for patients A Guide to MRAB



Infection Prevention and Control



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What is MRAB

Acinetobacter is a group of bacteria (germs), commonly found in the environment in soil and water. While there are many types, the most common of these that cause infections is **Acinetobacter Baumannii (AB)**, which accounts for most of the Acinetobacter infections in humans. Acinetobacter baumannii can cause infections in the blood, urinary tract, lungs, in wounds in other areas of the body. These bacteria (germs) are constantly finding new ways to avoid the effects of the antibiotics used to treat the infections they cause. Antibiotic resistance occurs when the germs no longer respond to the antibiotics designed to kill them. When resistant to multiple antibiotics, they are called **Multi-Resistant Acinetobacter Baumannii (MRAB)**.

How does MRAB spread?

Acinetobacter can be spread by person-to-person contact, contact with contaminated surfaces, equipment or exposure in the environment. Acinetobacter can enter the body through open wounds, catheters, breathing tubes and cannulas. You will be cared for in a side room with infection control precautions in place to prevent the spread of MRAB.

Can MRAB be treated?

Not all patients with MRAB need antibiotics. Sometimes the bacteria live on skin or in wounds without causing an infection (this is called colonisation). Acinetobacter infections are generally treated with antibiotics. However, MRAB is resistant to commonly prescribed antibiotics and patients with an MRAB infection may need to be cared for by a specialist doctor so they get the right treatment and antibiotics.

Notes:

Infection prevention and control is everyone's responsibility. Healthcare workers, patients and visitors all have a vital role to play in preventing the spread of healthcare associated infections.

Can I still have visitors whilst in hospital?

Yes, you can have visitors as MRAB does not usually pose a threat to healthy people, hospital staff or to family members. Your visitors will be asked to report to the nurse in charge before visiting. Visitors should not sit on your bed and should wash their hands with soap and water before and after visiting.

When should I wash my hands?

Hand hygiene is the single most important thing you can do to prevent the spread of infection.

You should make regular and thorough hand washing as part of your daily routine, especially:

- Before eating or handling food.
- After using the toilet/commode
- After touching your wound, catheter,
- After blowing your nose, coughing, or sneezing
- After touching animals or animal waste
- After handling soiled clothing/rubbish
- After changing a nappy
- Before and after touching a sick or injured person
- Before, during and after a visit to a hospital ward or residential or nursing home
- After removing any sort of glove

Do not forget to encourage children to wash their hands at these times too. **It is ok to remind healthcare staff to wash their hands.** It may feel like an awkward question to ask when someone is looking after you, but you are entitled to ask if you are concerned.

What happens after I go home?

There are no special precautions to take at home. Everyone should always wash their hands before handling food, before eating, after using the toilet and handling soiled linen and clothing.

Your GP should be informed of the MRAB colonisation or infection on your discharge letter, however if you are seeing your GP or admitted to a hospital, please remember to tell them that you have had MRAB in the past as this will affect what type of antibiotic they prescribe for you and you may require to be admitted to a side room.

How to manage or wash your soiled clothing?

We do not wash patients' personal clothing in hospital. If your own clothing becomes soiled, your clothes will be sealed in a special pink dissolvable bag. This pink bag will then be placed into a white plastic 'patient's property' bag and stored in your locker, ready to be washed at home.

How to wash soiled clothing using a washing machine:

1. Take the pink bag out of the white 'patient's property' bag.
2. Place the pink bag into the washing machine. Do not open the pink bag as it has been specially designed to go straight into the washing machine. Do not add any other items of clothing into the washing machine.
3. You should always wash your hands thoroughly after handling soiled clothing, or the bag of soiled clothing.
4. Use a biological powder, liquid, or tablets if possible.
5. Use a pre-wash cycle before the main wash cycle.
6. Wash the items at the very least 60°C so that the pink bag dissolves and releases the clothing into the washing machine (washing at a lower temperature may not dissolve the bag, which may result in the parts of the bag sticking to the clothing).
7. When the washing cycle is complete, remove the washing from the washing machine and dry the clothing naturally or in a tumble dryer.