

Fact Sheet 7

For:

Patients who are CPE contacts, their families and carers

What is CPE?

The gut of every normal, healthy human contains bacteria called Enterobacteriales. While they are in our gut they are good for us and they cause no harm. If these bacteria get into the wrong place, such as the bladder or bloodstream, they can cause infection. CPE superbugs do no harm as long as they stay in the gut. They do not cause diarrhoea, vomiting or tummy upset.

Carbapenemase-Producing Enterobacteriales (CPE) are a particular type of these common gut bacteria that are resistant to antibiotics. Antibiotic resistant bacteria are often referred to as superbugs. CPE is one type of superbug.

CPE have developed a resistance to a powerful group of antibiotics called carbapenems. Carbapenems are an important group of antibiotics that doctors often rely on to treat infections where treatment with other common antibiotics will not work. CPE are often resistant to many other antibiotics as well as to the carbapenems. There are still some antibiotics that do work against CPE.

What does it mean to be a CPE contact?

A **CPE contact** is a term used to refer to a person who has been identified by an infection prevention and control team or public health doctor as at higher risk of carrying CPE. A person is identified as a CPE contact because they have spent hours in the same space in a hospital as someone who is carrying CPE. Being a **CPE contact** does not mean that the person is carrying CPE but that the odds of them carrying CPE are higher than for other people. If you are a **CPE contact**, this means that there is a note on your hospital record that says you are a **CPE contact**. You may be given a small plastic card you can use to tell nurses and doctors that you are a **CPE contact**. If a person who is a **CPE contact** comes into hospital, they are offered testing for CPE and special precautions are taken in their care just in case they are carrying CPE.

Sometimes the hospital will only realise that you are a **CPE contact** after you have gone home from hospital. This may happen because the CPE test result that showed the other patient was carrying CPE only came back from the lab after you left the hospital.

What does that mean for me to be a CPE contact?

If you have been identified as a **CPE contact** patient during your hospital stay, you will be told about this by a member of staff. They will give you this leaflet and help you to find someone to talk to if you need more information. You will be asked for your permission to carry out tests to see if you carry CPE. The sample is a swab from the back passage (the rectum) or a sample of faeces (poo). If you have to stay in hospital for weeks, the nursing staff will take a sample every week for 4 weeks.

Will I have to stay in hospital for four weeks to get all the tests done?

No you will not need to stay in hospital just to have these tests done. The testing is only recommended as necessary for patients who are in hospital. This means that if you are well enough to go home the testing can stop. If you are going home but you would like to have the rest of the tests done after you go home the hospital can organise that for you but it is not needed.

Can I be tested for CPE?

We generally only recommend that **CPE contact** patients get tested for CPE if they are in hospital or going to be admitted to hospital. However, if you wish to be tested that will be arranged for you by the hospital who told you that you were a **CPE contact**.

What does testing for CPE involve?

Testing for CPE in hospital usually means taking a rectal swab (a sample taken by inserting a swab briefly just inside the back passage). Another way to do this is to ask you to give a sample of faeces (poo). The CPE testing for **CPE contacts** generally needs 4 samples taken over at least a 4-week period (samples taken with at least 1 week between samples). These samples will be tested in the laboratory. The result from each test may be ready in a day or two and generally should not take more than a few days.

If CPE is not found in any of the 4 samples you are no longer identified as a CPE contact. There will no longer be any need for special infection control measures in your care when you are in the hospital. The note can be taken off your hospital record and if you have a card that says you are a **CPE contact** you can give it back to the hospital for disposal.

What happens if the test for CPE is positive?

Generally, from about 1 in 10 to 1 in 20 **CPE contacts** will test positive for CPE. The vast majority of **CPE contacts** will not test positive for CPE.

If the CPE test is positive this will be discussed with you by a member of the clinical team. Patients who carry CPE going into hospital will generally be cared for in a single room or in a small ward with other people who carry CPE. People who carry CPE do not need antibiotic treatment. You may be given a small plastic card that you can use to remind doctors and nurses that you carry CPE.

Most people who carry CPE will suffer no illness as a result. The risk of a person carrying CPE developing serious CPE infection is low. For the small number who do develop CPE infection there are still some antibiotics that work and doctors will use these antibiotics early if they know the patient is carrying CPE.

If I have CPE, will I have it forever?

CPE is a gut bug. It is a lot like other gut bugs except it is resistant to antibiotics. Once CPE settles into the gut it usually stays for a long time. If you have good health and do not need

to take any antibiotics for a long time that gives you the best chance of getting rid of CPE or at least having it shrink to very small numbers.

Antibiotics will not remove CPE from your gut. In fact, most antibiotics usually make CPE stay in the gut even longer because they kill off the normal gut bugs and make the gut a better home for the CPE.

Will I become sick with CPE?

Generally, from about 1 in 10 to 1 in 20 **CPE contacts** will test positive for CPE. CPE superbugs do no harm as long as they stay in the gut. They do not cause diarrhoea, vomiting or tummy upset. The risk of a person carrying CPE developing serious CPE infection is low.

The risk of a CPE contact developing serious CPE infection is difficult to estimate precisely but we know it is low. We believe that the risk of serious CPE infection for a **CPE contact** may be about 1 in 400 to 1 in 600 (about 0.15%).

For the small number of people who do develop serious CPE infection there are antibiotics that work and doctors use these antibiotics early if they know the patient is carrying CPE.

Do I need to worry about spreading CPE when I am at home or out and about in public?

As a **CPE contact** there are special precautions in hospital these do not apply in ordinary life. You do not need to do anything different from anyone else as you go about your normal life at home, engaging in family life, or out and about. Just as for everybody else we recommend that you are careful about washing your hands. Following good hand hygiene practice all of the time helps all of us to prevent spread of bacteria and viruses. In relation to using the toilet it is really important that everyone leave the toilet clean and in the condition that you would like to find it. Everyone should wash their hands before eating or preparing food.

Should I use a separate bathroom?

There is no need for you to use a separate bathroom. Following good hand hygiene practice all of the time helps all of us to prevent spread of bacteria and viruses. In relation to using the toilet it is really important that everyone leave the toilet clean and in the condition that you would like to find it. Everyone should wash their hands before eating or preparing food.

Can I use public facilities without putting others at risk?

Yes, you should feel free to use public amenities including toilets without feeling that you are putting other people at risk.

Do I need to launder my clothes separately or use different dishes/cutlery?

There is no need to do anything different with laundry, dishes or cutlery.

My spouse is immunocompromised – can we share same bed etc.?

We do not recommend **CPE contacts** avoid or limit physical or intimate contact and there is no need to sleep in separate beds.

Do I need to tell people I am a CPE contact?

We do not recommend that you have to tell people you are a **CPE contact**. Talking to people we trust about things often helps if we are worried about something but it is up to you do decide who you would like to talk to about this.

Do I need to tell healthcare facilities/hospitals/OPD that I am a CPE contact?

Yes, it is important that you tell your healthcare provider that you are a CPE contact as it helps to plan your care and to offer you any extra tests that may be needed.

I am in a long term care facility – does being a CPE contact affect my care?

People who are identified as **CPE contacts** do not need to be separate from everyone else in a nursing home or similar living arrangement. Being a **CPE contact** does not mean that you are carrying CPE but that the odds of you carrying CPE are higher than for other people. Generally, from about 1 in 10 to 1 in 20 **CPE contacts** will test positive for CPE.

If you are a **CPE contact** and you live in a nursing home or similar facility, it may be helpful to avail of testing for CPE so that the results are back if you do need to go into hospital sometime.

Where can I find more information?

If you would like any further information, please speak to a member of your healthcare team.

For more information on antimicrobial resistance and healthcare acquired infection or to view CPE guidance check www.hse.ie/hcai