

Carbapenemase-producing Enterobacteriaceae (CPE)

DRAFT

Other formats

If you need this information in another format such as audio CD, Braille, large print, high contrast, British Sign Language or translated into another language, please contact the PALS desk on 01392 402093 or at rduh.pals-eastern@nhs.net (for Mid Devon, East Devon and Exeter services) or on 01271 314090 or at rduh.pals-northern@nhs.net (for North Devon services).

What does carbapenemase-producing Enterobacteriaceae (CPE) mean?

Enterobacteriaceae, also called coliforms, are bacteria that usually live harmlessly in the gut of humans. This is called 'colonisation' (a person is said to be a 'carrier'). However, if the bacteria get into the wrong place, such as the bladder or bloodstream they can cause infection. Carbapenems are one of the most powerful types of antibiotics.

Carbapenemases are enzymes (chemicals), made by some strains of these bacteria, which allow them to destroy carbapenem antibiotics and so the bacteria are said to be resistant to the antibiotics.

Why does carbapenem resistance matter?

Carbapenem antibiotics can only be given in hospital directly into the bloodstream. Until now, doctors have relied on them to successfully treat certain 'difficult' infections when other antibiotics have failed to do so. Therefore, in a hospital, where there are many vulnerable patients, spread of resistant bacteria can cause problems.

Does carriage of CPE need to be treated?

If a person is a carrier of carbapenemase-producing Enterobacteriaceae (CPE), they do not need to be treated. As mentioned, these bacteria can live harmlessly in the gut. However, if the bacteria have caused an infection then antibiotics will be required.

How is CPE spread?

If a patient in hospital is carrying these bacteria it can get into the ward environment and can also be passed on by direct contact with that particular patient. For that reason, the patient will normally be accommodated in a single room. Effective environmental cleaning and good hand hygiene by all, staff and patients, can reduce the risk of spread significantly.

Do I need to be screened?

We will ask to screen you, if you meet one or more of the following criteria:

- You have shared the same bay with a patient who has been found to be carrying CPE
- You have been an inpatient in a hospital abroad within the last 12 months
- You have been an inpatient in a UK hospital outside Devon, Cornwall and Somerset within the last 12 months.
- You have previously been colonised or had an infection with CPE or close contact with a person who has, if known.

How will I be screened for CPE?

Screening usually entails taking a rectal swab by inserting it just inside your rectum (bottom). Alternatively, you may be asked to provide a sample of faeces. The swab / sample will be sent to the laboratory and you will normally be informed of the result within two to three days.

What if the result is positive?

If the result is positive, do ask your doctor or nurse to explain this to you in more detail. You will be given a single room until you leave hospital. No treatment is necessary unless you have an infection when antibiotics will be given.

How can the spread of CPE be prevented?

Accommodating you in a single room helps to prevent spread of the bacteria. Healthcare workers should wash their hands regularly. They will use gloves and aprons or long-sleeved gowns when caring for you. The most important measure for you to take is to wash your hands well with soap and water, especially after going to the toilet. You should avoid touching medical devices (if you have any) such as your urinary catheter tube and your intravenous drip, particularly at the point where it is inserted into the body or skin.

What about when I go home?

Whilst there is a chance that you may still be a carrier when you go home, quite often this will go away with time. No special measures or treatment are required. Any infection will have been treated prior to your discharge. You should carry on as normal, maintaining good hand hygiene. If you have any concerns, you may wish to contact your GP for advice.

Further Information

If you have any questions that we have not answered in this leaflet, please ask your nurse or doctor caring for you on the ward or contact one of the Infection Control nurses.

For Eastern services, call 01392 402355

For Northern service, call 01271 322680

The following Government website is another source of information:

[Carbapenem resistance: guidance, data and analysis – GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/carbapenem-resistance-guidance-data-and-analysis)

References

UK Health Security Agency (2022) Framework of actions to contain carbapenemase-producing Enterobacterales London: UK Health Security Agency

PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern, please contact:

PALS Mid Devon, East Devon and Exeter

- call 01392 402093 or email rduh.pals-eastern@nhs.net. You can also visit the PALS and Information Centre in person at the Royal Devon and Exeter Hospital in Wonford, Exeter.

PALS North Devon

- call 01271 314090 or email rduh.pals-northern@nhs.net. You can also visit the PALS and Information Centre in person at the North Devon District Hospital in Barnstaple.

Have your say

Royal Devon University Healthcare NHS Foundation Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

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