Patient information factsheet

Information for patients who have been in contact with someone who has CPE

What is CPE?

CPE is short for carbapenemase-producing Enterobacteriaceae. Enterobacteriaceae 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. In a hospital, where there are many vulnerable patients, spread of resistant bacteria can cause problems.

Do people who are carriers of CPE need any treatment?

If a person is a carrier of CPE, they do not need any treatment. However, if the bacteria have caused an infection, antibiotics will be needed.

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 cared for in a single room. Effective environmental cleaning and good hand hygiene by all, staff and patients, can significantly reduce the risk of it being spread.

Do I need to be screened (tested)?

Occasionally, it isn't immediately known that a patient is carrying these bacteria and so they may not be placed into a single room straight away. Screening will be offered if you have shared the same bay (or ward) with a patient who has been found to be carrying CPE, as there is a slight chance that you could have picked up the bacteria and are carrying it too.

What does screening involve?

Screening usually involves taking a rectal swab (a sample taken by inserting a swab briefly just inside your bottom). Alternatively, we may ask you to provide a stool (poo) sample. Occasionally, other samples, such as a wound swab or urine sample, will be taken. The swab or sample will be sent to the laboratory and we will normally be able to tell you the result after three days.

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What happens if the result is negative?

If the result is negative, the doctors or nurses will check that a further sample is negative before you can be accommodated on the main ward. This will not affect your care in any way. If both results are negative, no further tests will be needed and you will be able to return to the main ward. Screening will be carried out again if you are admitted to hospital.

What happens if the result is positive?

If the result is positive, please ask your doctor or nurse to explain this to you in more detail. We will continue to care for you in a single room while you are still in hospital. If you have an infection, you will need to have antibiotics. However, if there are no signs of infection and you are simply carrying the bacteria, no treatment will be needed.

Where can I find more information?

If you would like any further information, please speak to a member of your healthcare team, who may also contact the infection prevention team for you.

Useful links

www.gov.uk/government/collections/carbapenem-resistance-guidance-data-and-analysis

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