**MRSA infection**

**Methicillin-resistant Staphylococcus Aureus**
caused by *Staphylococcus aureus* bacteria — often called "*staph."*
Resistant to the broad-spectrum antibiotics commonly used to treat it. — especially the penicillins and cephalosporins.

**Where is it?**
Staph is found on the skin or in the nose of about one-third of the population. Healthy people can be "colonized" with MRSA on their skin or in their nose and have no ill effects. However, they can still pass the germ to others.

**How does it make us ill?**
Staph bacteria are generally harmless unless they enter the body through a cut or other wound, and even then they often cause only minor skin problems in healthy people. But in older adults and people who are ill or have weakened immune systems, ordinary staph infections can cause serious illness.

**What caused MRSA?**
Unnecessary antibiotic use in humans
Antibiotics in food and water.
Genetic Mutations of the bacteria.

**Risk factors for hospital-acquired (HA) MRSA:**
- A current or recent hospitalization.
- Residing in a long-term care facility.
- Invasive devices - use strict sterile technique!
- Recent antibiotic use. Treatment with fluoroquinolones (ciprofloxacin, ofloxacin or levofloxacin) or cephalosporin antibiotics can increase the risk of MRSA.

**Risk factors for community-acquired (CA) MRSA:**
- Young age. Immune systems aren't fully developed or they don't yet have antibodies to common germs
- Participating in contact sports. The bacteria spread easily through cuts and abrasions and skin-to-skin contact.
- Sharing towels or athletic equipment. Athletes sharing razors, towels, uniforms or equipment.
- Having a weakened immune system. People with weakened immune systems, including those living with HIV/AIDS.
- Living in crowded or unsanitary conditions. Association with health care workers.

**What are the S/Sx of MRSA?**

*start as small red bumps that resemble pimples, boils or spider bites.*

**Turn into deep, painful abscesses that may require draining.**

MRSA can also invade the body, causing potentially life-threatening infections in bones, joints, surgical wounds, the bloodstream, heart valves and lungs. MRSA infection can be fatal from septicemia leading to septic shock!

**Diagnostic Tests:**
Culture and Sensitivity from the suspected site (sputum, urine, blood, skin) - takes about 48 hours to grow results!

**How is it treated?**
Vancomycin – potent IV antibiotic (but some MRSA are becoming resistant – known as Vancomycin Resistant SA) (VRSA)
Other strong antibiotics that MRSA is sensitive too – clindamycin, tetracycline
Cover infected wounds/wound management
Handwashing!
Standard Precautions
Contact Precautions
Drainage of any abscessed wounds

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