

C-DIF

Definition: *Clostridium difficile* is a spore-forming, Gram-positive anaerobic bacillus that produces two exotoxins: toxin A and toxin B. It is a common cause of antibiotic-associated diarrhea (AAD). It is usually brought on by an overuse of antibiotics in which good bacteria is killed. Patients with this have to resort to more powerful and multiple antibiotics to fight infections as well as restore their “good” bacteria. It is highly contagious and very prevalent in residential institutions

Transmission: It is shed in feces. Any surface, device, or material (e.g., commodes, bathing tubs, and electronic rectal thermometers) that becomes contaminated with feces may serve as a reservoir for the *Clostridium difficile* spores. The spores are transferred to patients mainly via the hands of healthcare personnel who have touched a contaminated surface or item.

Symptoms:

- watery and foul smelling diarrhea
- fever
- loss of appetite
- nausea
- abdominal pain/tenderness

Exposure: This is a surface contact issue in which feces transmit the contagion. Any contact with the feces of an infected patient places the provider at increased risk of exposure and becoming infected.

Precautions and PPE considerations: PPE should include gloves and gown if the patient has this infection and there is fecal material on the equipment. This should be cleaned with a bleach based solution, not alcohol bases in order to properly decontaminate the unit and cot.

Treatments: In about 20% of patients, *Clostridium difficile* infection will resolve within 2-3 days of discontinuing the antibiotic to which the patient was previously exposed. The infection can usually be treated with an appropriate course (about 10 days) of antibiotics, including metronidazole, vancomycin (administered orally), or recently approved fidaxomicin.

Work Guidelines: An exposure will be documented and the personnel shall be watched for any signs of C-Dif symptoms. If they occur they will be excluded from work and referred to a physician.