



COMMUNITY-ASSOCIATED Methicillin Resistant *Staphylococcus Aureus* (CA-MRSA)

What is *STAPHYLOCOCCUS AUREUS* (STAPH)?

Staphylococcus aureus, often referred to as "staph," are bacteria commonly carried on the skin or in the nose of healthy people. Approximately 25 percent to 30 percent of the population is colonized (when bacteria are present, but not causing an infection) in the nose with staph bacteria. Staph bacteria are one of the most common causes of skin infections in the United States. Most of these skin infections are minor (such as pimples and boils) and can be treated without antibiotics. However, staph bacteria also can cause serious infections (such as surgical wound infections, bloodstream infections, and pneumonia).

What is METHICILLIN RESISTANT *STAPHYLOCOCCUS AUREUS* (MRSA)?

Most staph bacteria are susceptible to antibiotics, and are termed methicillin susceptible *Staphylococcus aureus* (MSSA). Some staph bacteria are resistant to several antibiotics and are therefore more difficult to treat. MRSA is a type of staph that is resistant to antibiotics called beta-lactams. Beta-lactam antibiotics include methicillin and other more common antibiotics such as oxacillin, penicillin and amoxicillin. While 25 percent to 30 percent of the population is colonized with staph, only approximately 1 percent is colonized with MRSA.

Who gets staph or MRSA infections?

Staph infections, including MRSA, occur most frequently among persons in hospitals and healthcare facilities who have weakened immune systems. These healthcare-associated staph infections include surgical wound infections, urinary tract infections, bloodstream infections, and pneumonia.

What is community-associated MRSA (CA-MRSA)?

Staph and MRSA can also cause illness in persons outside of hospitals and health care facilities. MRSA infections that are acquired by persons who have not been recently (within the past year) hospitalized nor had a medical procedure (such as dialysis, surgery, catheters) are known as CA-MRSA infections. Staph or MRSA infections in the community are usually manifested as skin infections, such as pimples and boils, and occur in otherwise healthy people.

What does a staph or MRSA infection look like?

Staph bacteria, including MRSA, can cause skin infections that may look like a pimple or boil and can be red, swollen, painful, or have pus or other drainage. More serious infections may cause pneumonia, bloodstream infections, or surgical wound infections.



Frequently Asked Questions

Are certain people at increased risk for community-associated staph or MRSA infections?

Clusters of CA-MRSA skin infections have been investigated among athletes, military recruits, children, Pacific Islanders, Alaskan Natives, Native Americans, men who have sex with men, and prisoners.

Factors that have been associated with the spread of MRSA skin infections include: close skin-to-skin contact, openings in the skin such as cuts or abrasions, contaminated items and surfaces, crowded living conditions, and poor hygiene.

Are staph and MRSA infections treatable?

Yes. Staph and MRSA infections are treatable with antibiotics. If you are given an antibiotic, take all of the doses, even if the infection is getting better, unless your doctor tells you to stop taking it. Do not share antibiotics with other people or save unfinished antibiotics to use at another time.

Many staph skin infections may also be treated by draining the abscess or boil and may not require antibiotics. Drainage of skin boils or abscesses should only be done by a healthcare provider.

Is it possible that my staph or MRSA skin infection will come back after it is cured?

Yes. It is possible to have a staph or MRSA skin infection recur after it is cured. To prevent this from happening, follow your healthcare provider's directions while you have the infection, and follow the prevention steps below.

What can I do to prevent MRSA and other staph infections?

You can prevent spreading staph or MRSA skin infections to others by following these steps:

- Cover your wound. Keep any draining wound covered with clean, dry bandages. Follow your healthcare provider's instructions on proper wound care. Pus from infected wounds can contain staph and MRSA. Discard bandages or tape with the regular trash.
- Wash your hands. You, your family, and others in close contact should wash their hands frequently with soap and warm water or use an alcohol-based hand sanitizer, especially after changing the bandage or touching the infected wound.
- Do not share personal items. Avoid sharing personal items such as towels, washcloths, razors, clothing, or sports equipment that may have had contact with the infected wound or bandage. Wash soiled sheets, towels, and clothes with water and laundry detergent. Drying clothes in a hot dryer, rather than air-drying, also helps kill bacteria in clothes.
- If a sore or cut becomes red, oozes, causes pain, or is not healing, seek medical attention.
- Do not insist on antibiotics for treating colds or other viral infections.