What is **Clostridium Difficile Infection (CDI)**?

*Clostridium difficile* is the most commonly recognised cause of infectious diarrhoea in hospitalised patients. *Clostridium difficile* is a germ that can be found in the bowel. It was first recognised in the 1970’s as a common cause of diarrhoea in hospitalised patients.

In 2010, Australia reported a new type of *Clostridium difficile*. Since then the number of cases have increased. This germ can survive for a long time outside the body, that’s why cleaning the hospital and equipment is so important. Washing your hands with soap and water is better than using hand gels when dealing with people who have CDI.

What are the symptoms?

Most common is watery diarrhoea. People who have the germ may also feel sick, bloated, have a high temperature, don’t want to eat anything and could also have tummy pain.

How do I get *Clostridium difficile* Infection?

By coming into contact with “dirty surfaces” (contaminated with faeces, but you may not see it) and not washing your hands afterwards.

Sometimes the infection is brought on by antibiotics. Now and then the antibiotics you take may kill the good germs in your bowel and allow bad germs like *Clostridium difficile* to grow. This can lead to watery diarrhoea.

How is it spread?

Hospitals and other health care services such as residential care facilities (nursing homes) are areas where the germ is more likely to live and spread because the people in them may be sick, elderly, on antibiotics and may not be able to control their bowels. They are likely to touch lots of surfaces that may become “dirty” around their bed area. This may happen when:

- They are walking (with or without a carer)
- Sitting in a chair that may or may not have access to a table
- Being transported to another area

Healthcare workers can also spread the infection by not cleaning their hands between patients or after touching “dirty surfaces” or things like dirty clothes.

Are some people at a greater risk?

The risk of *Clostridium difficile* infection is increased in people who are:

- On antibiotics
- Elderly
- In hospital or residential care facility (nursing home) for a long time
- Very sick because they have more than one illness
- People who recently have had bowel procedures that involved surgery
• Not able to fight infection naturally\(^1\).

**Is it treatable?**

Yes. Treatment will be prescribed by the patient’s doctor. People with *Clostridium difficile* infection who have watery diarrhoea will be separated (isolated) from others.

**Sterilization of the bed pan**

*Clostridium difficile* is a very resilient germ and it has been demonstrated that the only reprocessing method that will effectively kill this germ is a standard steam sterilizing cycle, therefore the following is recommended:

• Each patient with *Clostridium difficile* should have either their own toilet or individual commode chair with a bedpan for the duration of their diarrhoea symptoms. Between individual patient uses the pan will be cleaned in the pan sanitiser/flusher in the ward and then returned to the patient’s room.

• When the patient with *Clostridium difficile* is discharged or they no longer have diarrhoea the bedpan will first be washed in the pan sanitiser/flusher in the ward and then it will be sent to the Central Sterilizing Department in a container or plastic bag to be sterilized using a standard steam sterilizing cycle.

• The bedpan does not need to be wrapped as it does not need to be kept sterile after the sterilising process.

**References**