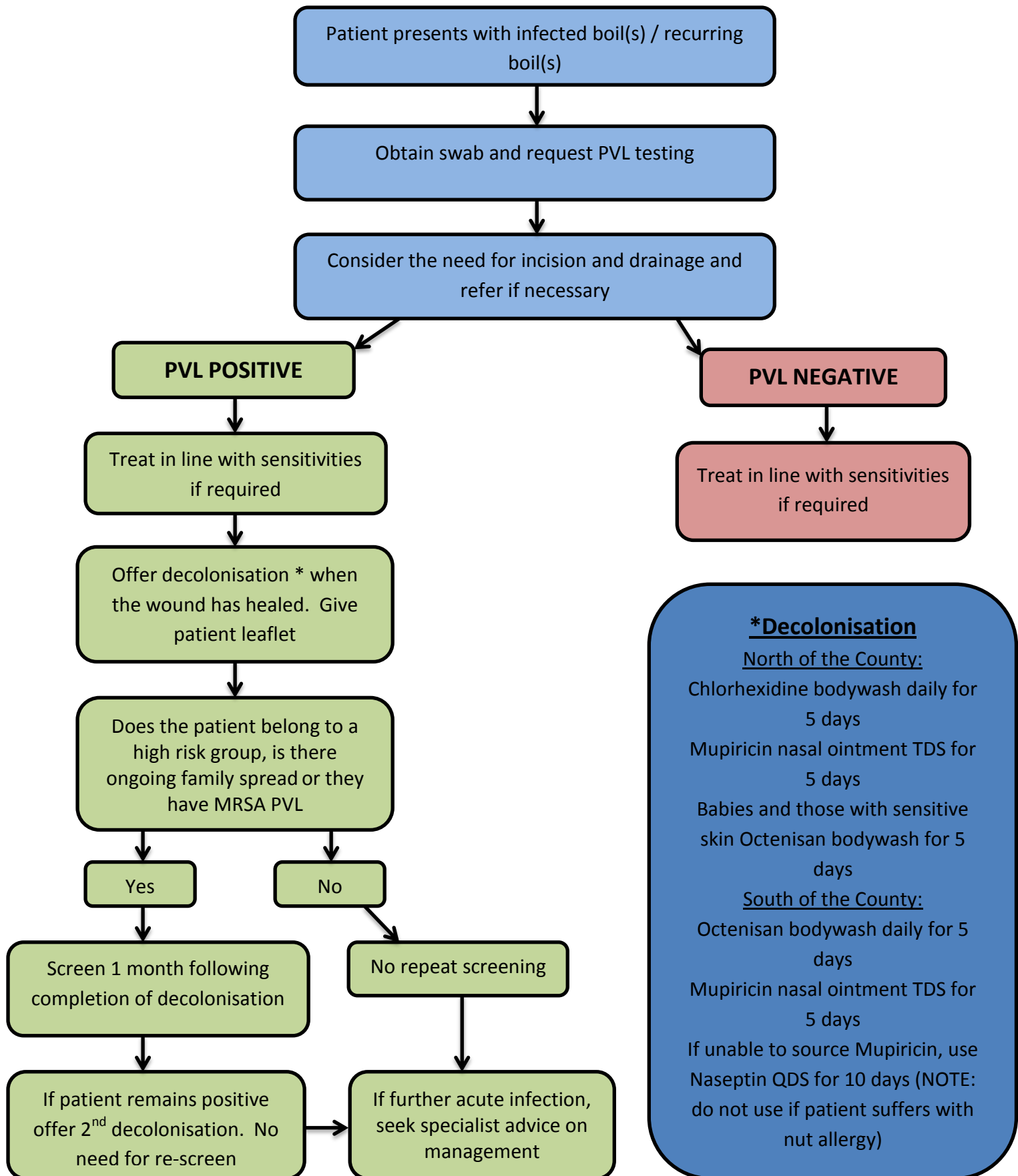


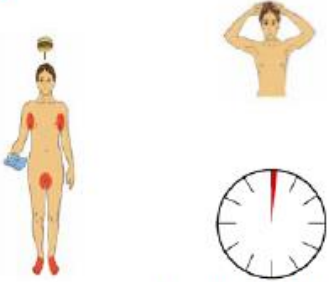





Appendix 1: PVL Management: Quick Reference Guide



Appendix 2

How to apply Chlorhexidine / Octenisan bodywash and Mupiricin (Bactroban) ointment

<p>1.</p>  <p>Ensure that your hair and body are wet</p>	<p>2.</p>  <p>Use 30 ml of solution</p> <p>Put the lotion onto a damp washcloth</p>	<p>3.</p>  <p>Leave the lotion on your skin for 3 minutes before rinsing</p> <p>Apply all over hair and body paying special attention to the areas indicated in red</p>
<p>4.</p>  <p>Rinse off thoroughly</p>	<p>5.</p>  <p>Dry with clean, dry towel</p>	<p>6.</p>  <p>Put on clean underclothes/nightwear every day</p>

Mupiricin (Bactroban) ointment application

Apply a matchstick head sized amount (less for a small child) on the end of cotton bud to inner surface of each nostril and massage gently upwards for 3 times a day for 5 days

Night clothes and bedding must be changed daily throughout the treatment and vacuuming and damp dusting completed daily during treatment.

Patient Information

PVL – Staphylococcus aureus

What is PVL Staphylococcus aureus?

Staphylococcus aureus is a bacterium (germ) that commonly lives on healthy skin. About one third of the population carry it harmlessly usually on moist surfaces such as the nose, throat and groin. This is known as colonisation.

Some types of Staphylococcus aureus produce a toxin called Panton-Valentine Leukocidin, these are known as PVL-SA.

What type of illness does it cause?

PVL-SA can cause harm if it has an opportunity to enter the body. They can cause boils or skin abscesses and are occasionally associated with more serious infections such as pneumonia and septicaemia (blood poisoning).

How do you catch PVL-SA?

Anyone can catch PVL and it may cause an infection or you may just carry it on your skin. PVL can be picked up by having skin to skin contact with someone who is already infected or carrying the bacteria on the skin, for example close family or during contact sports. It can also be picked up by contact with an item or surface that has PVL on it from someone else, for example sharing towels and equipment.

How is PVL-SA treated?

Boils and abscesses would normally be drained by incision and you may then require treatment with antibiotics. If tests show that you have an infection caused by PVL or you are carrying PVL, you will be offered further treatment consisting of a skin body wash and a nasal cream used over 5 days. This reduces the chances of you getting repeated infections and from passing it on to others. If you have a PVL infection that has not yet healed you should not work in a nursery, hospital, care home or the food industry. Children may go to school but only if they are old enough to keep the wound infection covered and they can wash their hands well. Individuals with PVL should not use gym equipment or take part in contact sports until the infection has gone.

What can me and my family do to reduce potential spread?

- Keep infected areas of your body covered with a clean dry dressing or plaster.
- Change plasters / dressings regularly and as soon as discharge seeps to the surface. It is important that fluid or pus from infected skin is contained, because it has large numbers of the PVL bacteria that can easily be spread to other people through skin contact.
- Do not touch, poke or squeeze infected skin. This could make the infection worse and you will be likely to pass it on to others.

- Regularly wash your hands.
- Encourage others in your household to regularly wash their hands.
- Do not share towels or wash cloths
- Do not share razors and make up
- Do not share bar soap, liquid soap is recommended
- Frequently wash towels and bed linen on a hot wash.
- Regularly dust and vacuum your home.
- Closely following the instructions for the five day skin treatment as prescribed by your GP.

If you are worried that a person you live with has this infection, discuss this with your GP. All the people you live with may need treating at the same time to prevent re-infection.

Can PVL-SA return?

PVL is a strain of *Staphylococcus aureus* that can live on our bodies and can sometimes be difficult to clear. Some people may persistently carry PVL in their nose or on their skin but it may not cause any problems.

If you have any repeat infections or are admitted to hospital as an emergency or for an operation, always tell the doctor or nurse looking after you that you have had a PVL infection. This will help you to have the right treatment and avoid spreading the infection.

Reference

Health Protection Agency (2008). Guidance on the diagnosis and management of PVL-associated *Staphylococcus aureus* infections (PVL-SA) in England, 2nd edition.