



# Infection Prevention & Control Department

### **ESBL**

Information for Parents & Carers

#### Introduction

This leaflet provides parents and carers with information about **ESBL** (Extended **S**pectrum **B**eta-Latamase) producing bacteria (germs).

#### What causes this condition?

ESBL stands for extended spectrum beta lactamase. Beta lactamases are enzymes produced by many species of bacteria which destroy one or more antibiotic.s. Different types of bacteria are able to produce this enzyme e.g. E.Coli, Klebisella and Enterobacter. These bacteria are commonly known as the Coliforms and live in the gut.

### What are the signs and symptoms of ESBL?

ESBL bacteria may be found during the weekly swabbing of the throat and rectum that is carried out in high risk areas such as Intensive Care, High Dependency Unit, Oncology, Cardiology and the Burns Unit. ESBL bacteria found on these swabs are said to be colonising. Colonisation means that the bacteria are present and are able to multiply but there are no signs of infection.

ESBL identified from other places such as wounds, blood stream and urine may be causing infection. The signs and symptoms will depend upon the site e.g. wound infection may cause symptoms such as a temperature, redness, discharge and pain.

### What treatment(s) are available?

Colonisation with ESBL bacteria doesn't require any treatment although antiseptic skin washes may be advised to reduce your child's risk of developing an infection. Antibiotic treatment is only required if a person is unwell.

Their resistance to certain antibiotics makes infections with ESBL bacteria more difficult to treat due to the restricted choice of antibiotics available.

The antibiotics given for severe ESBL infections are called the Carbapenems e.g. Meropenem. They have to be given intravenously. Side effects include nausea, vomiting and diarrhoea, rashes abdominal pain and headaches.

# Does anything increase the risk of someone acquiring ESBL?

Prolonged Hospitalisation and multiple antibiotics courses increase the risk of acquiring an ESBL bacteria. ESBL bacteria are also widely present in the community.

# Are there any implications for others i.e. infecting other people?

ESBL bacteria are able to pass their resistant genes to other bacteria as well as being difficult to treat so it is important that their spread is limited. Individuals found to be carrying ESBL bacteria should be nursed in a single room if available. Nursing and medical Staff should wear aprons and gloves for contact with your child or their immediate environment.

# How long does my child need to be isolated for?

Isolation precautions are necessary until your child has had negative swabs for 3 months. Carrying ESBL bacteria doesn't require your child to remain in Hospital.

## What are the risks to other family members?

Patients with an ESBL do not pose a risk to their families or to other healthy people. Family and friends can visit but they should wash their hands or use an alcohol-based handrub (sanitizer) before leaving the room. Visitors may still have close contact such as hugging, kissing and hand holding. Family members rarely get an ESBL. If they do, it does not usually cause a problem.

# Can a person be cleared of an ESBL-producing strain?

Sometimes the strain will be lost naturally.

In some children with serious illnesses, ESBL-producing strains may be present for months or even years. Use of antibiotics probably does not help. Antibiotics can treat infections but do not necessarily eliminate the bacteria from the body especially if they are in the gut.

# Who to contact for further information or support?

This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment.

The Infection Prevention and Control Team in the Hospital can also be contacted on the number below.

Infection Prevention & Control Nurses: 0151 252 5964 or 0151 252 5485

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This information can be made available in other languages and formats if requested.

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