C. Diff Infection Needs Concerted Action

According to an article published in *Infectious Diseases in Clinical Practice*, the appropriate use of antibiotics is critical for controlling the ongoing epidemic of healthcare related Clostridium difficile infection.

There is an urgent need to take steps for the reduction of the growing burden of C.Diff infections (CDI). C.diff is known to cause serious and potentially life-threatening diarrhea. The bacteria spreads easily as it can persist on any surface, device or material. Nearly 450,000 cases of C.diff infection were reported in the US in 2011. 29,000 patients died within 30 days of their diagnosis.

See also: Hospitals Not Making Enough Effort to Prevent C. difficile Infections

Despite the fact that C. diff is a significant hospital acquired infection (HAI), approximately three fourths of these infections are diagnosed outside of hospitals. Studies show that over 80 percent of patients diagnosed with C. diff infections had some form of healthcare exposure - either a visit to a doctor or a dentist.

Antibiotic treatment appears to be the most important risk factor for such infections. These drugs disrupt the normal balance of bacteria in the intestines and create an environment that enables C. diff spores to multiply and produce diarrhea-causing toxins. The C.diff strain NAP1/207 has proven to be especially resistant to antibiotics and may be the driving force behind the dramatic increase in the incidence of C. diff infections in the last decade.

Infection rates could be reduced by the appropriate use of antibiotics. Studies conducted recently identify key elements to implement antibiotic stewardship programs such as avoiding the unnecessary use of antibiotics and choosing antibiotics that have a lower risk of CDI. When implemented in a hospital in UK, this program reduced CDI by more than 60 percent.

The CDC has identified six key components of efforts that could help prevent CDI. These include:
• Careful prescribing and use of antibiotics
• Early and reliable diagnosis
• Immediate isolation of infected patients
• Contact precautions—wearing gloves and gowns for all contact with the patient and patient-care environment
• Adequate cleaning of the patient care environment, including the use of an EPA-registered *C. difficile* sporicidal disinfectant
• Effective communication about CDI status when patients are transferred between healthcare facilities

See also: Hospital Readmissions Twice as Likely for C. Difficile Patients

The study authors conclude that the current epidemiology of CDI requires the active participation of the healthcare community. There is a need to adopt a comprehensive approach that could help reduce the burden of CDI and this would include antibiotic stewardship and measures that would reduce spore transmission.

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