



Vancomycin-resistant enterococci (VRE).

Information for healthcare workers

What are Vancomycin-resistant enterococci (known as VRE)?

Enterococci are a group of bacteria that are naturally present in the intestinal tract of humans and normally cause no harm (colonisation). Sometimes enterococci can cause infections in wounds and in the urinary tract as well as more serious infections such as in the bloodstream.

VRE are enterococci that are resistant to an antibiotic called vancomycin and are often resistant to other types of antibiotics. VRE will not cause more serious infections than other enterococci however it is more difficult to treat.

Why are VRE of concern?

Most VRE are healthcare associated in 'high risk' groups such as patients in ITU.

- Colonisation can progress to infection.
- VRE can spread within healthcare facilities if standard infection control precautions (SICPs) and transmission based precaution (TBPs) are not followed.
- Treatment options may be limited if the patient requires antibiotic therapy.
- Treatment options available can be more toxic for patients and may prolong their hospital admission.

How is VRE spread?

VRE are most commonly spread through direct contact with the patient for example contaminated hands of Healthcare Workers (HCW) or indirectly from the patient's care environment for example frequently touched surfaces such as lockers or bed tables. As enterococci including VRE are found in the bowel and passed in faeces, particular care is required if the patient has loose stools. Consistently applying SICPs and TBPs appropriately is required to prevent the spread of VRE.

What are the most common risk factors for VRE Infection?

- Previous use of vancomycin or combinations of other antibiotics.
- Surgical procedures.
- Invasive medical devices e.g. central venous catheter (CVC).
- Inpatient stay within Intensive Care Unit.
- Persons with weakened immune system (immunocompromised).

How do we know which patients to test for VRE?

For advice on screening patients for VRE, you should refer to your Health Boards local policy. You can also contact your local Infection Control Team or Health Protection Team for further advice.

How should patients colonised or infected with VRE be managed?

In hospital

- You must consistently apply SICPs and appropriately follow contact precautions (TBPs) as per the National Infection Prevention and Control Manual <http://www.nipcm.hps.scot.nhs.uk/>. This should also be done when patients are admitted from a community setting.
- Patients who are colonised or infected with VRE and have symptoms such as loose stools or exudating drains/wounds should be isolated in a single room, preferably en-suite (unless the clinical care team says otherwise). The Infection Control Team will advise the most appropriate precautions if the patient is not symptomatic.
- Patients who are colonised do not need to be treated unless advised by the clinical care team. If an infection is confirmed, the clinical team and the infection control doctor must discuss the most appropriate antimicrobial treatment.
- If the patient needs to be transferred to another care area you should let the ward, unit or hospital know the patient's VRE status.
- You should provide an information leaflet for the patient and their relatives and discuss the leaflet with them.
- Advise relatives and visitors to wash their hands before entering and leaving the patient's room. They do not have to wear any personal protective equipment.

In the community

- You must apply SICPs.
- You do not need to make patients with VRE your last scheduled home visit, as SICPs will prevent the spread of infection.
- Patients in the community do not need to be screened for VRE.
- Crockery, cutlery and so on can be washed as normal.
- Clothes and bed linen can be washed as normal at the hottest temperature suitable for the fabric. If laundry is soiled, it should be washed separately as per the washing clothes at home leaflet <https://www.hps.scot.nhs.uk/web-resources-container/washing-clothes-at-home-information-for-people-in-hospitals-or-care-homes-and-their-relatives/>.
- There are no restrictions for visitors, but they should be encouraged to wash their hands with soap and water before entering and leaving the patients room/house.

Frequently asked questions from Healthcare Workers

Can I still care for a patient that has confirmed or suspected VRE if I am pregnant?

- Healthcare workers including those that are pregnant are at minimal risk of acquiring VRE as applying infection prevention and control precautions will prevent spread. If you have any concerns then contact your local Occupational Health Team or Infection Control Team

I have cared for a patient with confirmed or suspected VRE. Should I be tested?

- There is no need for you to be tested for VRE, unless the Infection Control Team or Occupational Health Team requests it as part of an outbreak investigation or incident.

Further Information

You can get further information from your local Infection Control Team or Health Protection Team.