



# Clostridioides difficile (Clostridium) (C.difficile)

Patient information



## **This leaflet aims to answer a number of commonly asked questions about Clostridioides difficile (C.difficile).**

Around 3 in 100 healthy adults, and as many as 7 in 10 healthy babies, have a number of C.difficile bacteria present in their gut. The bacterium can cause the person to develop diarrhoea.

This leaflet is intended to assist the discussion between you and the doctor or nurse caring for you.

### **What causes the C.difficile infection?**

Infection may develop when the normal bowel bacteria is altered, as a result of taking antibiotics to treat an infection. Taking antibiotics alters the balance of the health bacteria in the gut. This creates an opportunity for the C.difficile bacteria to multiply, which can cause toxins to be produced.

The toxins can affect the bowel, resulting in diarrhoea, abdominal pain and nausea. The diarrhoea can last for days or weeks if left untreated.

### **How do you catch it?**

Anyone who takes a course of an antibiotics is at risk of developing a C.difficile infection, as the bacterium can be present in the gut. However, the risk of infection is usually low and depends on the type of the antibiotic. Older people and anyone who has recently undergone surgery can be more susceptible to developing an infection.

### **How is it spread?**

The bacterium produces spores which are very tough and can contaminate the environment, especially when a person is experiencing diarrhoea. These spores can be easily transferred when we touch contaminated surfaces and then spread further when we touch other surfaces with our hands. The spores have to be ingested to gain entry into the body. The spores are microscopic, they cannot be seen.



## How is it diagnosed?

Patients presenting with diarrhoea (i.e. watery stools one or more times in a 24-hour period), would be tested for C.difficile, especially if they have recently taken antibiotics.

## I have been told that I am a carrier – what does that mean?

You are a carrier if the stool sample you provided was tested for C.difficile and bacterium was detected, but the part of the test to detect toxins was negative.

When a person experiences a C.difficile infection, the bacterium has multiplied and released toxins that cause the infection. The stool test result will be positive for the bacteria and positive for toxins.

## How is it treated?

This usually involves commencing a course of antibiotics specifically aimed to reduce the bacteria in the

bowel, and any current antibiotics will be reviewed by the doctor. Some people may require extended treatment depending on the symptoms.

## Should I take special precautions?

You should wash your hands regularly with soap and water, especially after each time you have been to the toilet. Please show your C.difficile card to any professionals caring for you.

## Should other people take any special precautions?

In hospital, you will have your own room with a designated toilet. All professionals who care for you should wear disposable gloves and aprons. Hands should always be washed with soap and water before and after assisting you.

## Remember:

**Always wash hands with soap and water. Hand gel does not kill C.difficile bacteria.**

## **C.difficile Patient Card**

Individuals living in Hull and the East Riding who test positive for C. difficile, as a carrier or infection, will be issued a C.difficile card.

If you are in hospital when you receive a C.difficile stool sample result, your card may be sent to you at home when you are discharged from hospital.

You must show this card to any health professional who is involved with your care.

The card lets health professionals know that you may be at risk of developing symptoms or having a recurrence of infection in the future.

It also allows them to take any additional precautions which may be relevant to your care.

### **Patient Advice and Liaison Service (PALS) and Complaints**

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