

# Cystic Fibrosis Infection Control

## General Hygiene Guidelines

People with Cystic Fibrosis are not unhygienic or unclean. However, they are more susceptible than others to acquiring organisms from respiratory secretions. These guidelines have been developed to reduce the risk of acquiring and transmitting certain bacteria amongst people with CF of all ages.

Good hygiene is important in reducing infection from all kinds of bacteria. Much of the following advice is applicable to all members of the community and not just those with cystic fibrosis.

- The guiding principle is to avoid transfer of respiratory and oral secretions.
- Always cover your mouth and nose when you cough or sneeze, preferably using a tissue whenever possible.
- Wash your hands frequently, particularly if you cough a lot. (Don't forget the tips of your fingers and the spaces between each finger).
- When using toilet/bathroom facilities wash your hands with soap for 10-15 seconds and **dry them thoroughly**.
- Wash your hands before eating.
- Do not leave sputum pots uncovered.
- Throw tissues away immediately after you use them, into a rubbish bag or bin.
- Avoid spa pools.
- Wash and dry fresh fruit and vegetables before eating.

## Additional guidelines for contact with other people with cystic fibrosis:

- Do not share respiratory equipment (nebulisers, masks).
- Do not eat or drink using the same utensils (glassware, cutlery, crockery) as other people with CF.
- Do not share drink cans, cups or bottles between people with CF.
- Do not share toothbrushes or towels.
- Do not share rooms with other people with cystic fibrosis if staying overnight.
- Refrain from shaking hands with other people with cystic fibrosis (light tap on the shoulder or arm are good alternative greetings).

## Hospital Out-Patient Clinics

### General Hygiene

The general hygiene rules below relate to all hospital staff, patients and their carers. These rules are to be observed particularly after contact with respiratory and oral secretions.

Good hygiene is important in reducing infection from all kinds of bacteria and viruses. Hygiene measures to avoid transfer of respiratory and oral secretions should be taken.

- Always cover your mouth and nose when you cough or sneeze, preferably using a tissue.
- Wash your hands frequently, particularly if you cough a lot.
- When using toilet/bathroom facilities wash your hands with soap for 10-15 seconds and dry them thoroughly.
- Wash your hands before eating.
- Do not leave sputum pots uncovered.
- Throw tissues away immediately after you use them, into a rubbish bag or bin.
- Do not share respiratory equipment.
- Refrain from shaking hands with other people with cystic fibrosis.

### Segregation Standard

Patients with *B.cepacia* and MRSA (methicillin-resistant staphylococcus aureus) are to be segregated in Cystic Fibrosis Out-Patient Clinics from other people with cystic fibrosis. Segregation can be observed in TIME and/or SPACE. If separate clinics aren't possible, patients should come at the end of clinic, be visited by the team in a separate room and not mix with general clinic patients.

## Respiratory Function Testing

The standard TSANZ infection control guidelines for respiratory laboratories are to be observed.

## Toys/Sweets

Sharing of toys (especially for young children who put toys in their mouths) is discouraged. Studies have shown that shared jars of sweets and lollies are sources of infection.

## Newly Diagnosed People with CF

People with CF who are attending a Cystic Fibrosis Out-Patient Clinic for the first time should be required to have a sputum test one week before attendance (to include testing for *B.cepacia* and MRSA) to avoid casual introduction of new organisms to the clinic. This particularly applies to patients from overseas.

## Group Sessions

It is acknowledged that group sessions could be of benefit to participants. Consideration should be given to room size and to ensure there is adequate ventilation. General hygiene rules to be observed and people with *B.cepacia* and MRSA are not to be included.

## Hospital In-Patients

### General Hygiene

The general hygiene rules below relate to all hospital staff, patients and their carers. These rules are to be observed particularly after contact with respiratory and oral secretions.

Good hygiene is important in reducing infection from all kinds of bacteria and viruses. Hygiene measures to avoid transfer of respiratory and oral secretions should be taken.

- Always cover your mouth and nose when you cough or sneeze, preferably using a tissue.
- Wash your hands frequently, particularly if you cough a lot.
- When using toilet/bathroom facilities wash your hands with soap for 10-15 seconds and **dry them thoroughly**.



- Wash your hands before eating.
- Do not leave sputum pots uncovered.
- Throw tissues away immediately after you use them, into a rubbish bag or bin.
- Do not share equipment.
- Refrain from shaking hands with other people with cystic fibrosis.

#### Room Sharing

It is agreed that the ideal would be for all patients in hospital (not just patients with cystic fibrosis) to be in single rooms. However, this is recognised as not being feasible at present in all centres and the following standard is to be followed for people with cystic fibrosis.

#### Standard

People with *B.cepacia* and MRSA are to be segregated from other patients with cystic fibrosis and if possible, from each other (this also applies to patients infected with other known epidemic strains of bacteria or respiratory viruses such as influenza).

#### Masks/Gowns/Gloves

It is considered that unless there is gross contamination by respiratory or oral secretions, there is no evidence that the routine use of masks, gowns or gloves in treating patients with cystic fibrosis makes any difference to preventing cross-infection above that provided by good personal hygiene (and in particular, hand washing) as described.

#### Chest Physiotherapy/Gym

It is agreed that in settings where increased coughing occurs, the risk of cross infection by droplet spread might be increased. In general, patients with cystic fibrosis should not share physiotherapy sessions, particularly in confined (e.g. beds less than two metres apart) and poorly ventilated spaces. If this is not

possible, it is recommended that patients with *B.cepacia* and MRSA be segregated from other patients with cystic fibrosis.

#### Socialising in Hospital

In hospital settings where socialising occurs, such as the hospital school, playrooms and communal areas, patients with *B.cepacia* and MRSA are to be segregated from other patients with cystic fibrosis.

#### Respiratory Function Testing

The TSANZ infection control guidelines for respiratory laboratories are to be observed.

#### Utensils/Food

The general hygiene rules for sharing utensils and food are to be observed.

- Do not share respiratory equipment.
- Do not eat or drink using the same utensils as other people with cystic fibrosis.
- Do not share drink cans, cups or bottles between other people with cystic fibrosis.

The guidelines in this brochure have been drawn up to establish minimum standards, following consultations with New Zealand and Australian specialists involved in CF care, microbiologists and infection control advisers. These guidelines are current as at September 2004.



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Branch Details



# Cystic Fibrosis

## Infection Control & Hygiene Guide



1 in 25 people carry the CF gene

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