

PVL-*Staphylococcus aureus*



Information for service users

Staphylococcus aureus is a common type of bacteria (germ) that approximately one in three people carry on their skin or in their nose without being aware of it. *Staphylococcus aureus* can live harmlessly on your skin or in your nose for long periods without causing any illness. This is known as colonisation.

Some types of *Staphylococcus aureus* (SA) produce a toxin (poison) called Panton-Valentine Leukocidin (PVL) and these are known as PVL-SA.

What does PVL-SA cause?

PVL-SA often causes boils or abscesses, these can develop anywhere on the skin, but most likely occur at the site of an infected hair follicle (hole where a hair grows from). Boils commonly develop on areas of skin where there is a combination of hair, sweat and friction, such as the neck, face, thighs or buttocks.

PVL-SA can also cause a wound infection if it gets into a wound, cut or graze. On rare occasions, it can cause serious infection of the lungs, blood, joints and bones.

How is PVL-SA spread?

- Like *Staphylococcus aureus*, anyone can acquire PVL-SA, it may cause an infection or you may just be colonised (carry it on your skin). PVL-SA can be picked up by having direct skin contact with someone who is already infected or carrying the bacteria, such as a close family member or during contact sports, for example rugby.
- It can also be picked up by contact with an item or surface that has PVL-SA on it, for example, gym equipment, shared razors, shared towels.

How is PVL-SA treated?

- People who are colonised with PVL-SA do not usually require treatment.
- Most boils will burst and heal on their own without the need for antibiotics and/or incision and drainage. You should seek advice from your GP if you are concerned or have either a high temperature or flu like symptoms.
- To reduce the possibility of you developing further infections and help prevent the spread of PVL-SA to others, you may be given a five day skin suppression treatment consisting of a body wash and nasal ointment. It is important to follow the skin suppression treatment correctly to increase the success of the treatment.
- Your GP or local Community Infection Prevention and Control (IPC) Team may recommend that members of your household and close contacts, including partners and children, are screened and/or offered skin suppression treatment where necessary. If both you and your close contacts are advised to undertake suppression treatment, treatment should be co-ordinated so you all apply it on the same five days.



Always inform healthcare staff of your current or previous PVL-SA infection when you receive any treatment.

What to do when you have an active infection

- Keep boils or abscesses covered with a clean dressing. Change the dressing regularly or when there is visible discharge.
- **Do not** touch, poke or squeeze boils or abscesses as this can cause a deeper infection.
- Keep fingernails clean and short.
- Wash your hands regularly with liquid soap and warm running water, e.g. after changing your dressing, before and after preparing food.
- Use a clean towel for your use only, this should not be shared and kept separately to avoid contamination. The towel should be washed daily, on the hottest temperature stated on the label.
- Encourage others at home to wash their hands regularly with liquid soap and warm running water or use a hand wipe or alcohol handrub. Do not use bar soap.
- Do not share razors, facecloths or sponges.
- Regularly vacuum and dust all rooms (minimum 2-3 times a week) with a damp cloth, ensuring all personal items and shared items, such as keyboards, are cleaned. A household detergent is adequate or a disinfectant spray.
- Clean the wash basin, taps and shower or bath, after use with a bathroom cleaner or household detergent and a cloth. Dispose of the cloth after use.
- Cover your nose and mouth with a tissue when you cough or sneeze, as PVL-SA can live in your nose. Immediately dispose of the tissue and then wash your hands with liquid soap and warm running water or use alcohol handrub.



Can I go to work or school when I have a PVL-SA infection?

- People who have an active skin condition, such as eczema or psoriasis, should remain off work or school until the PVL-SA suppression treatment has been completed and the skin condition is stable.
- If you are a carer in a nursery or health care setting, such as hospital or care home, you should not work until your skin has healed and your local occupational health department or GP has agreed that you can return to work.
- If you work in the food industry, for example as a waitress, chef, or in food production, you should not work until your skin has healed.
- For other occupations you can work, provided you keep infected skin areas covered with a clean dressing.
- Children can go to school if they are old enough to understand the importance of and can carry out good hand hygiene, and their infected skin is covered with a clean dressing which will stay dry and in place until the end of the school day. Children should not take part in contact sport or use communal gym equipment until their skin is healed. You should inform the School Nurse of the diagnosis.



Can I go to swimming pools, gyms or sports facilities when I have a PVL-SA infection?

You should not use communal facilities, such as gym equipment, saunas, swimming pools or have a massage, manicure or similar until your skin has healed.

Whilst you are receiving suppression treatment

To help prevent the infection spreading to others, you should:

- Keep fingernails clean and short
- Wash your hands regularly with liquid soap and warm running water or use alcohol handrub, do not use bar soap
- Use a clean towel for your use only, this should not be shared and kept separately to avoid contamination.
- Encourage others at home to wash their hands regularly with liquid soap and warm running water or use a hand wipe or alcohol handrub
- Clean any spectacles and sun glasses worn with an appropriate cleaning product daily, paying particular attention to the areas in contact with your skin
- Only wear jewellery and watches that can be washed or wiped daily with detergent and warm water
- Not use sponges, flannels, body scrunchies to apply suppression treatment
- Use disposable razors, wash after each use and dispose of regularly. Electric or battery operated razors are not advised due to the difficulty in cleaning the razor head effectively
- Not share personal items, such as razors, toothbrushes, hair brushes or combs. Only use aerosol deodorants, do not use roll-on deodorants
- Wash hands before applying body moisturisers which should be in a pump dispenser to avoid contamination and should not be shared
- Use Corsodyl mouthwash, which may help to kill *Staphylococcus aureus* (SA) bacteria which is often carried in the throat
- Clean the wash basin, taps and shower or bath after use with a bathroom cleaner or household detergent and a cloth. Dispose of the cloth after use
- Wash hands thoroughly before applying any facial products, e.g. moisturising creams
- Wash make-up brushes after each use
- Use make-up sponges once and then dispose of after use
- Keep cuts and grazes clean and covered with a clean dressing until scabbed over or healed
- Cover your nose and mouth with a tissue when you cough or sneeze, as PVL-SA can live in your nose. Immediately dispose of the tissue and then wash your hands with liquid soap and warm running water or use alcohol handrub
- Wear clean clothing each day, including nightwear
- Spray the inside of footwear with an antibacterial spray daily
- Wash towels, clothes and bedding, daily on the hottest temperature stated on the label
- Regularly vacuum and dust all rooms (minimum 2-3 times a week) with a damp cloth, ensuring all personal items and shared items, such as keyboards, are cleaned. A household detergent is adequate or a disinfectant spray
- Not share drinking bottles/cans, e.g. water, soft drinks



How do I reduce the risk of becoming infected again?

PVL-SA can sometimes be difficult to clear and some people may be persistently colonised (carry it in their nose and on their skin). Therefore, the following is advised.

- Spray the inside of shoes and trainers regularly with an antibacterial spray.
- If you use an establishment with shared facilities, such as a gym, wipe gym equipment before and after use with hard surface cleaning wipes.
- Only use gym equipment where a towel can be placed between your skin and the equipment.
- It is important to wash hands thoroughly and shower afterwards, using a separate clean towel to dry yourself.

Personal hygiene

- Take good care of your skin. If you suffer from a skin condition, e.g. eczema, psoriasis, discuss treatment with your GP.
- Keep cuts and grazes clean and covered with a clean dressing until scabbed over or healed.
- Keep fingernails clean and short.
- Cover your nose and mouth with a tissue when you cough or sneeze, as PVL-SA can live in your nose. Immediately dispose of the tissue and then wash your hands with liquid soap and warm running water or use alcohol handrub.
- Wash your hands regularly with liquid soap and warm running water or use alcohol handrub, do not use bar soap.
- Shower or bathe at least daily. An antibacterial shower gel and facial wash may be beneficial.
- Loofahs should be not used. Sponges, flannels, body scrunchies can harbour bacteria so are not advised. If used, they should be washed after each use in a washing machine at 60°C.
- Hair and beards should also be washed frequently, e.g. at least every other day.
- Electric or battery operated razors are not advised due to the difficulty in cleaning the razor head effectively. Use disposable razors, wash after each use and dispose of regularly.
- Don't share personal items, such as razors, toothbrushes, hair brushes or combs. Replace these items regularly.
- Only use aerosol deodorants, do not use roll-on deodorants.
- Wash hands before applying body moisturisers which should be in a pump dispenser to avoid contamination and should not be shared.
- Wash hands thoroughly before applying any facial products, e.g. moisturising creams.
- Do not share drinking bottles/cans, e.g. water, soft drinks. It is especially important not to share drinking bottles whilst playing contact sports, e.g. football, rugby.
- Wear clean clothes including nightwear daily and wash all clothing, including jeans, hats, scarves, gloves as frequently as possible.
- Dry clean coats and suits regularly, consider purchasing coats and suits that can be washed.



Frequency of washing or cleaning items

Always wash items at the highest temperature recommended on the label.

- Vacuum or steam clean sofas, chairs, mattresses regularly. Carpets should be vacuumed at least weekly. If you have had a number of repeat infections, consider replacing carpets with a wipeable flooring, e.g. laminate, vinyl.
- Use a laundry bin with a plastic liner which can be cleaned, or a fabric one that can be

washed in a washing machine weekly.

- Wash bed linen at least weekly. Wash towels, where possible, twice weekly.
- Use mattress and pillow protectors and wash weekly. Launder or replace pillows and duvets on a regular basis.
- Wash sleeping bags after each use.
- If a child has PVL-SA, wash comforters, soft toys and child car seat covers regularly.
- Use a car seat cover if you drive for long periods and wash the cover weekly.
- If sponges, flannels or body scrunchies are used, they should be machine washed at 60°C after each use.
- Wash hair brushes and combs at least weekly.
- Clean any spectacles and sun glasses worn with an appropriate cleaning product weekly, paying particular attention to the areas in contact with your skin.
- Wash make-up brushes after each use, only use make-up sponges once and then dispose of after use.
- After each visit to the gym, wash any towels which you have taken.
- Sports clothes should always be washed after wearing.
- Wipe equipment, such as mobile phones, tablets, game consoles including accessories, with a detergent wipe on a regular basis.

If you require further advice and information on PVL-*Staphylococcus aureus*, please contact your local Community Infection Prevention and Control or UK Health Security Agency Team.

Community Infection Prevention and Control, Harrogate and District NHS Foundation Trust

www.infectionpreventioncontrol.co.uk

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