CDC Vitalsigns™

Staph infections can kill
More prevention in healthcare & communities needed

Want to learn more?
www.cdc.gov/vitalsigns/staph

119,000 More than 119,000 bloodstream staph infections occurred in 2017.

20,000 Nearly 20,000 people died with bloodstream staph infections in 2017.

9% Nearly 1 in 10 serious staph infections in 2016 occurred in people who inject drugs such as opioids.

Overview:

Staphylococcus aureus (staph) is a germ found on people's skin. Staph can cause serious infections if it gets into the blood and can lead to sepsis or death.

- Staph is either methicillin-resistant staph (MRSA) or methicillin-susceptible staph (MSSA).

- Staph can spread in and between hospitals and other healthcare facilities, and in communities.

- People are at higher risk for staph infection when they have surgery or stay in healthcare facilities, have medical devices in their body, inject drugs, or when they come in close contact with someone who has staph.

- Additional tactics in healthcare—such as decolonization (reducing germs people may carry and spread) before surgery— along with current CDC recommendations could prevent more staph infections.

PROBLEM:

MRSA may be better known but any staph can be deadly.

- Staph is a leading cause of infections in US healthcare facilities.

- Current recommendations have reduced MRSA in healthcare, but progress has slowed. Recent data suggest MSSA rates are not declining.

- The rise of staph infections in communities may be connected to the opioid crisis. In 2016, 9% of all serious staph infections happened in people who inject drugs—rising from 4% in 2011.
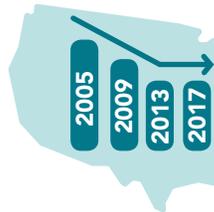
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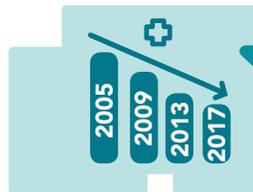
Take action against all staph.

Progress is slowing but success is possible.

US rates of hospital-onset MRSA infections dropped 17% each year until 2013.

2005 2009 2013 2017

MSSA may be rising in communities and progress against MRSA has recently slowed in hospitals.

By 2017, US Veterans Affairs (VA) medical centers reduced MRSA by 55% and MSSA by 12%.

2005 2009 2013 2017

The VA reduced rates of staph infections after adding steps like screening new patients.

What puts people at risk for serious staph infection?

In Communities

- Uncovered or draining wounds, especially in high-contact sports or crowded living
- Sharing personal items, such as towels or razors
- Recent stays in a healthcare facility
- Injection drug use, like opioids

In Hospitals

- Hospital stays or surgery (during and shortly after)
- Exposure to patients carrying or infected with staph
- Medical devices in the body, like intravenous lines (IVs)

In Other Healthcare Facilities

- Outpatient surgery and procedures, like dialysis
- Nursing home stays
- Medical devices in the body, like IVs

SOURCE: *Morbidity and Mortality Weekly Report* (MMWR), March 2019.

Staph infections and deaths are preventable.

- Healthcare facilities can make MRSA and MSSA prevention a priority by assessing the facility's staph infection data, implementing prevention actions, and evaluating progress.

- Many hospitals have successfully prevented infections and spread. Ongoing assessment of facility data and implementation of prevention strategies are critical to this success.

THE WAY FORWARD »

HEALTHCARE PROVIDERS CAN:

- Follow current recommendations for preventing device- and procedure-related infections.

- Prevent spread of staph, including use of Contact Precautions (gloves and gowns) for resistant infections. Consider actions including screening high-risk patients and decolonization of germs during high-risk periods, such as intensive care unit (ICU) stays, surgery, or device use.

- Treat infections appropriately and rapidly if they do occur.

- Educate patients about ways to avoid infection and spread, and about early signs of sepsis.

EVERYONE CAN:

- Keep hands clean and cover wounds.

- Avoid sharing items that contact skin, such as towels, razors, and needles.

- Watch for signs of infection and its complications, like sepsis.

- Tell your future healthcare providers if diagnosed with a resistant staph infection.