

## CAN CHILDREN WHO CARRY ESBL PRODUCING BACTERIA LEAVE THEIR ROOM?

Yes, however, please check with the nurse caring for your child first, and he or she will explain if there are any restrictions (e.g. your child may not be permitted to use communal ward areas such as the playroom or dining room during their hospital stay). If in doubt, please check with the ward manager or a member of the nursing staff.

## CAN YOU BRING TOYS AND OTHER ITEMS FROM HOME INTO THE HOSPITAL?

Yes, we encourage parents to bring in their own buggies, high chairs, baby bouncers and toys. We also recommend that these items are not shared with other children on the ward or in the hospital.

## WHAT ABOUT VISITORS?

Visitors are permitted. Visitors are advised to wash their hands on entering and leaving the ward. Visitors are not allowed to sit or lie on children's beds.

Visitors are asked not to enter the ward if they are suffering from diarrhoea, vomiting, coughs, colds or weeping skin conditions.

## WHAT HAPPENS WHEN YOUR CHILD GOES HOME?

These bacteria will not usually affect family or friends. There is no need to restrict either the child's activities or visits by friends. A good standard of personal hygiene and household cleaning is sufficient.

## WHAT HAPPENS IF MY CHILD IS READMITTED?

If readmitted to hospital please let your doctor or nurse know your child has a previous history of colonisation/infection of ESBL.

***If you have any further questions please do not hesitate to ask the doctor or nurse caring for your child.***



### DISCLAIMER

©2013, Our Lady's Children's Hospital, Crumlin, Dublin 12. all rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means without the prior written permission of the copyright holder. Our Lady's Children's Hospital, Crumlin makes no representation, express or implied, with regard to the accuracy of the information contained in this publication and cannot accept any legal responsibility for any error or omissions that may be made.

*Developed by: The Department's of Infection Control/Infectious Diseases,  
Our Lady's Children's Hospital, Crumlin, Dublin 12*

Acknowledgment: This leaflet was adapted from the Southern Queensland Infection Control Network @ Princess Alexandra Hospital, July 1999

July 2013

EXTENDED SPECTRUM  
BETA LACTAMASE  
PRODUCING BACTERIA

ESBL'S



**INFORMATION LEAFLET  
FOR  
PARENTS / GUARDIANS**

## WHAT IS AN ESBL?

**ESBL** stands for **EXTENDED SPECTRUM BETA LACTAMASE**

Beta-Lactamase is an enzyme produced by bacteria. If this enzyme is produced it can break down some commonly used antibiotics and prevent them from fighting infection.

ESBL producing bacteria were first reported in Europe in 1983. They have now been identified worldwide.



ESBL producing bacteria may become part of this normal flora, growing and multiplying without causing any infection. If this is the case then a person is said to be colonised but not infected by the bacteria.

A few people will go on to develop infection. Infection from an ESBL producing bacteria may occur anywhere in the body but is most likely in urine it may also infect wounds or cause a blood stream infection.

## HOW DO WE KNOW THAT SOMEONE IS CARRYING AN ESBL PRODUCING BACTERIA?

A stool sample (i.e. a sample of faeces) will be obtained from children that we know are most likely to become colonised with these bacteria while in hospital.



Children are also encouraged to wash their hands before eating and before and after using the toilet.



Ideally, children who carry ESBL'S will be given a single room when they are admitted to hospital (subject to availability). Hospital staff taking care of them will be advised to wear gloves and a disposable plastic apron when performing certain tasks in the child's room.

If your child has been found to carry these bacteria, it is important that neither you nor your child visit other children in the ward or in the hospital.

## IS TREATMENT AVAILABLE?

Yes, if your child develops an infection that requires antibiotic treatment, then treatment is available. Knowing your child is colonised assists the medical team to prescribe the most appropriate antibiotic.

Children who carry an ESBL producing bacteria and who have no signs or symptoms of infection do not have to stay in hospital until the ESBL producing bacteria is cleared (antibiotics are not recommended for treatment of ESBL colonisation). The length of your child's hospital stay should not be affected by ESBL carriage.



## WHY DO WE LOOK FOR ESBL PRODUCING BACTERIA?

People in hospitals are more at risk of infection because their body's defense mechanisms are weakened by illness, surgery, medical procedures and drugs such as antibiotics. Finding ESBL producing bacteria can influence our choice of antibiotics for your child should they need them.

## WHAT DOES COLONISATION MEAN?

A healthy person normally carries thousands of harmless bacteria on their skin or in their gut- these bacteria are called "Normal flora".

## HOW DO ESBL PRODUCING BACTERIA SPREAD?

ESBL's are spread from people who are colonised with the bacteria. Unwashed hands are the main way that they are passed from one person to another. Equipment, toys and other objects in the environment can also become contaminated.

## PREVENTING THE SPREAD OF ESBL PRODUCING BACTERIA

Good hand washing practices will help prevent the spread of these bacteria. Healthcare workers and visitors to the ward are required to wash their hands.