

MRSA: What Is It & Should I Worry?

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What Is MRSA?

MRSA is an acronym for Methicillin-resistant Staph aureus. More and more for parents and students, these are the four scariest letters in the alphabet. Sometimes you might see it referred to as CA-MRSA, or Community-associated MRSA.

Staphylococcus aureus, often referred to simply as "staph", are bacteria commonly carried on the skin or in the nose of healthy people. Approximately one in three Americans are colonized with this bacteria, meaning that the bacteria are present, but not causing an infection.

Sometime, staph can cause an infection. Staph bacteria are one of the most common causes of skin infections in the United States. Most of these skin infections are minor (such as pimples and boils) and can be treated without antibiotics. However, staph bacteria can also cause serious infections, such as surgical wound infections, bloodstream infections, and pneumonia.

Some staph bacteria are resistant to some or many antibiotics. MRSA is a type of staph that is resistant to antibiotics called beta-lactams, which include methicillin and other more common antibiotics such as penicillin and amoxicillin. MRSA became prevalent in adults in the late 1970s, but remains uncommon despite media hysteria to the contrary. While one in three Americans are colonized with staph, only 1 in 50 are colonized with MRSA.

Who Gets Staph or MRSA Infections?

For decades, staph infections, including MRSA, have occurred most frequently among persons in hospitals and healthcare facilities (such as nursing homes and dialysis centers) who have weakened immune systems. These infections can also cause illness in persons outside of such facilities, most commonly in drug abusing individuals (especially methamphetamine abusers), but also in otherwise healthy people.

Only in recent years has CA-MRSA become more common in children, though it remains unusual. Adolescent athletes and, perhaps most concerning, young babies seem to have the highest risk of MRSA colonization among otherwise healthy children, as do children exposed to drug-abusing or recently-incarcerated family members. Fortunately, very few cases of CA-MRSA are truly the multi-drug resistant "superbugs" so hyped in the media.

What Does A Staph or MRSA Infection Look Like?

Staph bacteria, including MRSA, can cause skin infections that may look like a pimple or boil and can be red, swollen, painful, or have pus or other drainage. Such infections are often mistaken for spider bites, and may be solitary or multiple. More serious infections may cause pneumonia, urinary tract infections, bloodstream infections, or wound infections.

How Can I Prevent Staph or MRSA Skin Infections?

Factors that have been associated with the spread of MRSA skin infections include: close skin-to-skin contact (such as wrestlers), openings in the skin such as cuts or abrasions, contaminated items and surfaces (especially in daycares, or gymnasium or athletic equipment), crowded living conditions, and poor hygiene.

Practicing good, common-sense hygiene is the best way to prevent MRSA infections. Keep your hands clean by washing thoroughly with soap and water or using an alcohol-based hand sanitizer. Keep cuts and scrapes clean and covered with a bandage until healed. Avoid contact with other people's wounds or bandages. Avoid sharing personal items such as towels or razors. Wipe surfaces of shared athletic equipment between use.

Are Staph and MRSA infections treatable?

Yes. Most staph and MRSA infections are treatable with antibiotics. If you are given an antibiotic, take ALL of the doses, even if the infection is getting better. Do not share antibiotics with other people or save unfinished antibiotics to use at another time.

However, many staph skin infections may be treated solely by draining the abscess or boil, and often do NOT require antibiotics. Such drainage should only be done by a healthcare provider.

Most MRSA infections, while resistant to penicillin and its synthetic relatives (such as methicillin), is still responsive to other types of common and widely-used topical (such as Bactroban) and oral (such as Trimethoprim-Sulfa/Septa, Rifampin, Tetracycline, Linezolid/Zyvox, and Clindamycin) antibiotics. Only in unusual circumstances is MRSA resistant to multiple antibiotics, and almost always this form of MRSA is acquired in the hospital or chronic care setting rather than in the community.

Is It Possible That My Staph or MRSA Skin Infection Will Come Back After It Is Treated?

Yes. It is possible to have staph or MRSA skin infections recur after being cured. Once a person is colonized with staph or MRSA, they are considered always colonized, and always at higher risk for recurrence. Following the steps to good hygiene will reduce your chances of recurrence.

If I Have A Staph or MRSA Infection, What Can I Do To Prevent Spreading It To Others?

Cover your wound with clean, dry bandages. Discard used bandages immediately. Wash your hands frequently with soap and warm water for at least one minute, or use an alcohol-based hand sanitizer regularly throughout the day. Do not share personal items. Drying clothes in a hot dryer, rather than air-drying, also helps kill bacteria in clothing.