

Hospital Circular

- Distribution:** Public Hospitals
Private Hospitals
Bush Nursing Hospitals
- Subject:** Vancomycin Resistant Enterococci (VRE) — An Emerging Pathogen
- Purpose:** To provide information on proposed strategies on VRE by the Standing Committee on Infection Control, Health & Community Services
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Antibiotic resistance is an increasing problem in hospital acquired enterococcal infections. Enterococci remain important pathogens in urinary tract infections, intra-abdominal and pelvic infections, and in bacteraemia. Levels of resistance to specific agents and multiplicity of resistance are known to be increasing in other parts of the world such as the United States.

Enterococci are known to be spread by contaminated hands of health-care workers. In addition to health-care workers, reservoirs include nursing-home patients and patients in intensive care settings. Environmental reservoirs such as door handles, have also yielded isolates of enterococci.

Emerging problems with resistant enterococci have caused alarm and have involved in some cases costly investigations. The methods of control have always been costly in terms of new drugs and trying to improve controls against cross-infection. In some instances there has been no available effective antibiotic treatment for serious infections, such as endocarditis due to VRE.

Like Methicillin-Resistant *Staphylococcus Aureus* (MRSA), VRE may well spread through hospitals in Australia. In the face of this emerging pathogen, and particularly in view of the finding of a strain of VRE at one Victorian hospital during 1994, Victoria must plan to recognise early the spread of these organisms and develop control measures which are likely to be effective.

The Standing Committee on Infection Control has established a Working Group to make recommendations to the Department on the detection, prevention and management of VRE.

Proposed Directions

1. A meeting was held with the Directors of Microbiology of the principal metropolitan hospitals where discussion took place on surveillance and containment of VRE, and optimal use of resources in surveillance, confirmation and specialised testing.
2. At this meeting it was decided that any VRE strains detected should be referred to the Microbiological Diagnostic Unit (MDU), University of Melbourne for confirmation.

3. Infection control strategies for preventing the spread of Vancomycin Resistant Enterococci are currently being developed by the Standing Committee on Infection Control and will be forwarded to all Victorian hospitals when completed.

In the meantime some measures that can be recommended are:

- Prudent vancomycin use by clinicians;
- Education of hospital staff regarding the emerging problem of vancomycin resistance; and
- Early detection and prompt reporting (to the Standing Committee on Infection Control) of vancomycin resistance in enterococci and other gram positive micro organisms by hospital microbiology laboratories

In view of the possible public health implications it would be appreciated that this advice is widely circulated within your institution.

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