

# Preventing infection in haemodialysis

## VRE

### What is VRE?

VRE is another name for Vancomycin Resistant Enterococci. Enterococci are bacteria normally found in the bowel and the female genitourinary tract. Vancomycin is an antibiotic used to treat infections with resistant bacteria like golden staph. Some enterococci have become resistant to Vancomycin.

Most often, enterococci cause urinary tract infections; but they can also cause infections if the content of the bowel finds its way into the abdominal cavity or blood stream. In the very sick, infections may be associated with devices such as AV grafts and haemodialysis catheters. These can cause life threatening bloodstream infections.

VRE was first detected in Australia in 1994 and since has spread in hospitals across Australia.

### How is VRE spread?

Enterococci can contaminate hands, equipment and the environment. Touch is an important means of transmission.

### How can I tell if I have VRE?

It can be impossible for you to tell if you have VRE. Most people who have VRE are colonised. Colonisation means the microorganisms are present, but you don't have any signs or symptoms of infection. You will know if you have an infection. Infection means that the microorganisms are present and are multiplying in your body, this causes you to have some or all of the following signs and symptoms:

- Fever, chills and generally feeling unwell
- Inflammation (redness, swelling, pain and pus)
- Blood tests can show a rise in white cell count

### How is VRE diagnosed?

Detection of VRE in people who are colonised requires a microbiological examination of either faecal specimen or a rectal/perianal swab. The specimen will then be examined in a laboratory to determine if the infection is VRE.



### How is VRE treated?

Because VRE rarely causes infection, treatment is not required. Antibiotics are available for treating serious VRE infection, and a hospital stay may be needed.

### What are the risks of carrying VRE?

Most people who have been infected or colonised will continue to carry VRE in their bowel for some months. At present there is no way of eliminating VRE when it is carried in the bowel.

For those who are colonised with VRE, the risk of passing VRE on to your carers or other patients is slight. However, as VRE lives in the bowel, if you have diarrhoea or you are incontinent of faeces, you will be shedding VRE at a higher rate than normal, this means there is a greater risk of VRE being of passed on to someone else.

## Screening

Screening refers to a program of routine testing of specific patient groups to detect VRE colonisation. Screening is most commonly used when there is an outbreak of infection or when the risk of VRE transmission is high.

Screening for VRE is not recommended for people who dialyse in satellite centres or at home. The risk of VRE transmission is low in these environments.

The most common screening test is a rectal or perianal (the area around the anus) swab. Your dialysis team can explain the procedure to you.

Participation in screening programs is voluntary and you have the right to refuse screening if you wish. You should discuss your concerns with your dialysis team and carers.

## I have VRE – where can I dialyse?

Being colonised with VRE should not prevent you from dialysing in any Victorian public satellite dialysis centre.

If you are colonised with VRE and you have diarrhoea or are incontinent of faeces, you are likely to be shedding VRE at a high rate, and this means you can pose a risk to other people who dialyse. Your dialysis team will need to use additional infection prevention precautions to prevent VRE being passed from you to other people. Precautions include the dialysis team wearing gloves and gowns when they are caring for you or touching your equipment or chair, also, you may be dialysed in an area that is separate to the other dialysis patients such as an area off to one side of the unit or in a separate room.

If this is case, not all satellite dialysis units may be able to offer you a dialysis services while your diarrhoea or incontinence of faeces persist. You may wish to discuss your options with dialysis team and carers. It is important to know that there is no need for you to miss any of your dialysis treatments because of VRE.

## What can I do to prevent the spread of VRE?

Good hand hygiene practice for yourself and for your dialysis team and carers is the most important thing that you can do to minimise the risk of VRE spread. Always wash your hands or use an alcohol based hand rub when you arrive at your dialysis centre, before and after you have contact with any shared equipment, such the weighing scales and before you leave the centre.

## Taking a holiday

Generally, there should be no need for you to be tested for VRE if you are planning a holiday within Victoria and will be dialysing at another public satellite dialysis centre.

You may be asked for a VRE test if you are travelling interstate or overseas or if you are incontinent of faeces or have diarrhoea.

**For more information about preventing infection in maintenance haemodialysis, go to the dialysis webpage**  
[www.health.vic.gov.au/renaldialysis](http://www.health.vic.gov.au/renaldialysis)