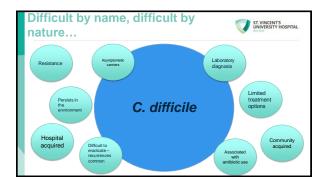


C. difficile- A Hardy Foe

S. McNicholas Consultant Microbiologist SVUH, NRH

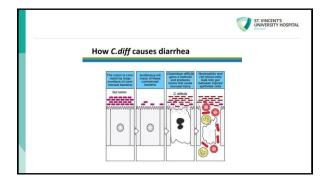


Clostridioides difficile

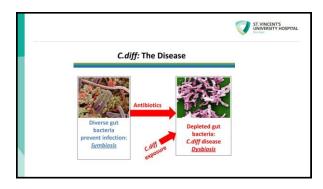


- Clostridioides difficile (C. difficile) is an anaerobic bacteria normally found in the large intestine
- · Forms spores
- Toxin producer
- Antibiotic use can cause

other bacteria to die allowing $\it C. \ difficile$ to multiply and cause infection

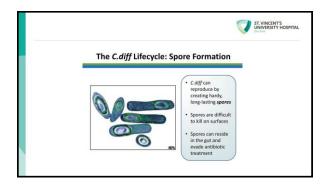






CDI and antimicrobial use • CDI is directly related to antimicrobial use • CDI is directly related to antimicrobial use

Clinical impact – C.difficile infection (CDI) Diarrhoea Pseudomembranous colitis Severe colitis Toxic megacolon Sepsis Death Difficult to eradicate – recurrences common (1 in 5)



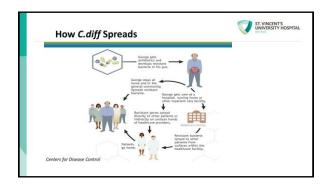


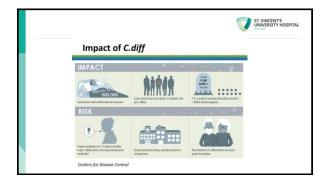


Epidemiology



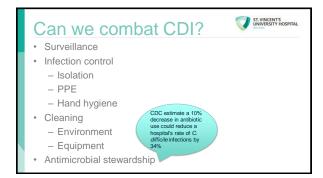
- First identified 1935, associated with disease in 1978
- Carried in the gut by infants up to the age of 2 years
- Present in 2-5% of the adult population
- Cases can be healthcare associated or community acquired
- Mid 2000s appearance of hypervirulent, resistant strains





C. difficile in Ireland 2017 1,766 C. difficile infections notified 32.4 Crude Incidence Rate/100,000 population 2.2 Rate hospital-acquired* cases/10,000 BDU Notifiable since May 2008





Antibiotics do not cause CDI but they disrupt the microbiota predisposing to infection – Antimicrobial stewardship Spread within healthcare settings – Infection control Major public health crisis – raise awareness New treatment – research

