

HCAI/AMR Newsletter December 2017: CPE - A Public Health Emergency

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What does this mean for general practitioners?

Why was a public health emergency called?

What is CPE (Carbapenemase Producing Enterobacteriaceae)?

How does CPE spread?

Are there concerns that patients known to be colonised with CPE might be stigmatised?

Does CPE cause diarrhoea?

What if I have a patient known to be colonised with CPE and they become unwell (fever, malaise, cough, etc.)?

What about patients with urinary tract symptoms or urinary catheter?

How can we prevent the further spread of CPE?

Are there particular extra care precautions for known CPE patients?

What about home visits/nursing home visits for patients known to be carrying CPE?

What are the implications of CPE for me and my practice colleagues and team (including reception staff)?

This seems to be an evolving issue. Where can GPs find the most up to date information if they have a patient with CPE?

Description

Dr Nuala O Connor, ICGP Lead advisor on Antibiotic resistance HCAI AMR, asked Professor Martin Cormican, HCAI AMR Lead on the Public Health

Emergency Team, some questions to inform GPs on what they need to know about CPE.

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