

MULTI-DRUG RESISTANT ORGANISM COLONISATION (MRSA, ESBL ETC.)
Supporting information

This guideline has been prepared with reference to the following:

Clinical Practice Guidelines by the Infectious Diseases Society of America for the Treatment of Methicillin-Resistant *Staphylococcus Aureus* Infections in Adults and Children. 2011

<http://cid.oxfordjournals.org/content/52/3/e18.full>

Mupirocin ointment is of value in the decolonisation of MRSA carriers?

A Cochrane systematic review of 9 RCTs involving 3396 participants (van Rijen, 2008) found that, after pooling the 8 studies that compared mupirocin with placebo or with no treatment, there was a statistically significant reduction in the rate of *S. aureus* infection associated with intranasal mupirocin (RR 0.55, 95% CI 0.43 to 0.70).

A report of an outbreak of MRSA in a hospital in the USA (Lepelletier, 2009) however, found that although the outbreak was controlled with widespread use of mupirocin in both staff and patients, ongoing spread was not eradicated, with nine further sporadic cases being detected over the subsequent 18 month period.

Lepelletier D, Corvec S, Caillon J, et al. Eradication of methicillin-resistant *Staphylococcus aureus* in a neonatal intensive care unit: which measures for which success? *Am J Infect Control* 2009;37:195-200

van Rijen M, Bonten M, Wenzel R, et al. Mupirocin ointment for preventing *Staphylococcus aureus* infections in nasal carriers. *Cochrane Database of Systematic Reviews* 2008, Issue 4. Art. No.: CD006216
<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD006216.pub2/full>

Evidence Level: I

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