



## Infection Prevention & Control

### CPE

## (Carbapenemase Producing Enterobacteriaceae)

### A patient's guide

#### What is CPE?

- CPE stands for Carbapenemase-producing Enterobacteriaceae. These are bacteria, usually *Escherichia coli* (*E. coli*) or *Klebsiella* that live in the bowel (intestines) and become resistant to antibiotics.
- For most people who have these bacteria living in them, this causes no harm (this is called colonisation).
- Unfortunately, if they cause infection, this can be serious, as there are few antibiotics to treat it.

#### How do people catch CPE?

- It can be impossible to know exactly how an individual has developed CPE colonisation but there are risk factors for being colonised.
- CPE has been seen in hospitals outside the UK and in the UK as well as in London. In some hospitals there has been cross infection from one patient to another.
- To reduce the risk of cross infection, 'suspected carriers' are screened (tested) to determine if they do have the bacteria.

#### Who is a 'suspected carrier'?

- If you are being admitted to hospital, we will ask you two questions to find out if you are at risk of being a suspected carrier.
  1. Have you been an in-patient in a hospital outside the UK or in a UK city within the last 12 months?
  2. Have you been told you have a resistant strain of *E. coli* or *Klebsiella*?
- If the answer to either of these questions is 'yes' we will then test you.
- If a patient is found to be CPE positive within the hospital, we may also test nearby patients to ensure that there has been no spread.

#### How do we test for CPE?

- As CPE colonises the bowels, we need to take a swab (sample) from your rectum (bottom) to test to ensure you are not colonised. This is then sent to the laboratory. It takes around two working days for a result.
- While waiting for the result, we may isolate you to reduce the risk of cross infection to others.



### What if the swab is negative?

- If the swab is negative, you are not currently carrying CPE. But we may need to take another swab depending on risk of carrying CPE.
- If you are re-admitted, you will be asked the questions again and will need to be tested again.

### What if any of the swabs are positive?

- If any of the swabs come back as positive, then you are considered CPE positive. If you are not currently in isolation, you will be isolated. Visitors will be asked to wash their hands thoroughly when leaving your room.
- As CPE is very resistant, you may not be treated unless you have an infection. Even if treated, there is a possibility that not all of the bacteria will be killed. Further testing following treatment could show negative, but it may turn positive again in the future.
- Therefore, we have to assume that if you are positive once, you are positive always.
- A diagnosis of CPE colonisation should not delay your discharge.

### What do I do at home if I have CPE?

- There are no special measures that you will need to take at home.
- As the bacteria is found in the bowel, please make sure that you always wash your hands after using the toilet.
- People living in the same household can pass bacteria to each other. Therefore, if you are admitted to hospital in the future, please inform staff that you or a member of your household have CPE.

### Any further questions?

- If you have any further questions, please contact the Infection Control Team, on 020 7288 3679, or you can ask the ward manager to contact us.
- Additional information can be found on NHS Choices: <https://www.nhs.uk/> and <https://www.nhs.uk/conditions/antibiotics/antibiotic-antimicrobial-resistance/>



### Patient advice and liaison service (PALS)

If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or [whh-tr.PALS@nhs.net](mailto:whh-tr.PALS@nhs.net)

If you need a large print, audio or translated copy of this leaflet please email [whh-tr.patient-information@nhs.net](mailto:whh-tr.patient-information@nhs.net). We will try our best to meet your needs.

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