Nurses critical in fight against antimicrobial resistance crisis

A leading expert has urged companion animal practices to act now to avoid a potential antimicrobial resistance crisis.

MRSA rates in staff at some practices are now as high as 13 per cent, while bacterial resistance means more and more antibiotics are effectively useless against a wide range of infections.

Steps have to be taken to stem the tide and, speaking after the launch of Pfizer’s Respect Antibiotics campaign, Tim Nuttall of the University of Liverpool said the industry needed to get its house in order.

Dr Nuttall said: “We do not have an antibiotic resistance crisis in the UK yet, but if we do nothing we soon will.

‘Some countries are already there. In referral centres in Japan and the US, for example, colonisation and/or infection rates with MRSA and MRSP are reported to be between 30 to 40 per cent.

‘In the UK we have a window of opportunity to adopt best practice in responsible antimicrobial use and infection control to minimise the development of resistance and preserve the efficacy of our drugs for the future.’

Vets must lead the way in preventing the development and spread of antibiotic resistance. And according to Dr Nuttall veterinary nurses have a crucial role to play.

He added: “Nurses are the key to infectious disease control. They are at the sharp end of patient care and cleanliness. Nurses should play a leading role in developing, implementing and enforcing infection control measures in veterinary practice.”

“Training in infection control, and in understanding microbiology and antimicrobial resistance, is vital for the modern veterinary nurse.”

Dr Nuttall worked with the BSAVA and the RCVS to develop their guidance on antimicrobial resistance and infectious disease control.

“Veterinary practices must have comprehensive infectious disease control guidelines. They should cover effective hand hygiene, cleaning and disinfection, and management of animals with antimicrobial-resistant infections. It is essential that infection control protocols are easily available, understood and followed by all practice staff.

“Clinical audits should be used to monitor the effectiveness of these measures and provide early warning of any problems. This can be supported by monitoring pathogens in the environment, although this is better used when investigating problems,” he said.

Lorena Hall is a veterinary nurse based at the University of Lincoln who has lectured widely on the subject of disease control. Like Dr Nuttall, she too believed veterinary nurses were important in the implementation and enforcement of disease control measures in veterinary practices.

She said: “As with all pathogens, prevention is critically important in the fight against MRSP and MRSA. Veterinary nurses are on the front line and have a critical part to play.

“Standard procedures within the veterinary establishment should be in place as routine. There may be an infection control policy in place for MRSA and this can be adopted in cases of MRSP as infection control management is the same.

“It is imperative such policies are implemented and regulated. This could be by senior nursing staff. There is little to gain in having policies if they are not being followed. Infection control precautions are vital in the prevention and transmission of MRSP and MRSA between animals and humans or animals and animals, especially when infection is diagnosed.”

As well as following stringent protocols in practice, great care should be taken when discharging a patient that has received treatment for MRSA or MRSP.

Ms Hall added: “Throughout the consultation, treatment and subsequent discharge of the patient, it is important to practice a high level of sensitivity while keeping the owners fully informed.

“Owners will need advice on follow up treatment, infection control in the home and also to be advised that anyone who is immunocompromised, very young or elderly or postoperative should avoid contact with the infected or colonised patient.”