NHS
Royal Berkshire
NHS Foundation Trust

Vancomycin resistant enterococcus (VRE)

This leaflet is for patients, relatives and visitors and explains what VRE is, who is most at risk from it and how it is managed / treated.

What is VRE?

Vancomycin resistant enterococcus (VRE) is a type of bacterium (or germ) that is commonly found in the gastrointestinal tract (gut or bowel) and in the genital tract of women. In the majority of people the enterococcus is harmless, but in some people it can cause infection such as urinary tract, wound or bloodstream infection.

VRE is a type of enterococcus that has become resistant to the antibiotic vancomycin. Vancomycin is an important antibiotic belonging to the glycopeptide class of antibiotics which are used to treat serious infections. When enterococcus is Vancomycin resistant, the antibiotic cannot kill the bacterium and therefore cannot be used to treat infections. Vancomycin resistant enterococcus bacteria are sometimes also called GRE – (Glycopeptide resistant enterococcus).

What is colonisation?

Some people can carry VRE for weeks or months usually in the gastrointestinal tract without becoming ill. This is called VRE colonisation. VRE colonisation produces no symptoms but the bacterium can be passed on from a colonised patient to other patients (see below). VRE can also be spread to objects and surfaces in a room.

Who gets VRE?

People most likely to get colonised or infected with VRE are those who:

- have a serious illness that harms the body's ability to fight infection
- are in hospital for a long time
- have been taking antibiotics for a long time including vancomycin
- have had medical devices which have stayed in for a long time (for example urinary or central intravenous catheters)
- have undergone surgical procedures, such as abdominal or chest surgery

Special precautions

Hospitals use special precautions to help prevent the spread of VRE. This includes:

- **Screening**: Some wards/departments screen patients for VRE when they are admitted and/or when they go home to see if they are colonised with VRE. This helps to make sure that patients are cared for and treated in the most appropriate way while in hospital. Since VRE is most commonly found in the gastrointestinal tract, screening involves taking a swab from the area around the anus (bottom).

- Patients may be nursed in a single room.
- Patients requiring special precautions must stay in their room when possible. When leaving the room patients and visitors must either, wash their hands with soap and water and/or foam sanitiser if hands are visibly clean.
- Patients' personal items should be kept to a minimum and stored in drawers or cupboards to keep the surfaces clear to allow for effective cleaning.
- Before entering and leaving the room, all staff must either wash their hands with soap and water on removal of gloves and aprons.

Will having VRE delay my discharge from hospital?

Having VRE should not delay your discharge from hospital. If, as part of your treatment, you need to be transferred to another ward or hospital, there may be some delay if you require a single room.

When you go home

When you are discharged you can return to your normal routine. Laundry and dishes can be done as usual and no special cleaning is required.

If you receive care from nurses, doctors or therapists or are re-admitted to hospital it is important to inform them that you are colonised with VRE.

Questions and concerns

If you have any questions or concerns about VRE, please ask your nurse for further information or you can contact the Royal Berkshire NHS Foundation Trust Infection Control team on 0118 322 6914, email: infection.control@royalberkshire.nhs.uk.

How do I find out more?

Thames Valley Health Protection Team Tel: 0344 225 3861 https://www.gov.uk/health-protection-team

United Kingdom Heath Security Agency Website: https://www.gov.uk/guidance/enterococcus-species-and-glycopeptide-resistant-enterococci-gre

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

Simon Wells, RBFT Infection Prevention & Control, November 2024
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