

Carbapenem-Resistant *Acinetobacter baumannii* (CRAB) For Hospitals



Acinetobacter baumannii is a type of bacteria commonly isolated from environmental samples, including soil and water. Many members of the *Acinetobacter* genus are considered environmental organisms, however *Acinetobacter baumannii* is almost exclusively found in health care environments.

A. baumannii is an opportunistic pathogen, affecting people who are immune-compromised due to other comorbidities. CRAB bacteria have developed resistance to a group of antibiotics called “carbapenems,” which are often used for treating severe infections caused by other resistant bacteria.



How is CRAB spread?

CRAB is most often spread person-to-person in health care through direct contact with infected or colonized patients, via health care workers' hands following care of those patients, or from the bacteria's persistence in the patient's environment.



Who is at risk for CRAB?

- ▶ **Healthy individuals do not usually get CRAB infections.** Patients, especially those with long hospital or nursing home stays, open wounds, tracheostomies or invasive devices like ventilator use or urinary catheters, are at risk for infection.
- ▶ Patients with weakened immune systems, chronic lung disease, or diabetes are also at risk for infection.



How are CRAB infections treated?

- ▶ *Acinetobacter* is resistant to many commonly prescribed antibiotics. Treatment decisions should be made on a case-by-case basis by a health care provider.
- ▶ Colonized residents not showing active signs of infection do not need to be treated or decolonized.



Why is CRAB prevention important?

- ▶ Infections caused by CRAB are more difficult to treat and are associated with increased mortality and health care costs.
- ▶ Carbapenem resistance can be easily transmitted to other bacteria and lead to widespread antibiotic resistance. *Acinetobacter* can live on skin and may survive in the health care environment for months.
- ▶ Careful attention to infection prevention measures, such as hand hygiene, the proper use of gowns and gloves, thorough environmental cleaning, and use of dedicated equipment and supplies can help reduce the risk of transmission.

See other side for more information 





What precautions should be followed in hospitals?

- ▶ **Hand hygiene with alcohol-based hand rub (ABHR) or soap and water is the most important measure to prevent the transmission of CRAB.**
 - ▶ Hand hygiene should be done before and after changing dressings, providing patient care, and accessing indwelling devices.
 - ▶ Patients and visitors should also be encouraged to perform hand hygiene often.
- ▶ Place colonized or infected patients in contact precautions for the duration of the hospital stay and flag the chart for future admissions.
- ▶ Increase the frequency of environmental cleaning and disinfection, especially high-touch surfaces.
- ▶ Whenever possible, use single-use, disposable non-critical equipment or dedicate equipment to one patient. Thoroughly clean and disinfect all patient care equipment after use.
- ▶ Linens, dishes, and trash can be handled in the usual manner according to the hospital waste stream.
- ▶ Ensure appropriate use of antibiotics.
- ▶ Clearly communicate the patient's multi-drug resistance organism (MDRO) status upon transfer to any health care facility and to ancillary service (e.g., dialysis, podiatry) providers so proper precautions can be taken in those settings.

For questions, please contact the Wisconsin Healthcare-Associated Infections (HAI) Prevention Program at **608-267-7711** or dhswhaipreventionprogram@dhs.wisconsin.gov.

