

## The ABC of Clostridium difficile infection:

Consider *C difficile* infection in any adult with diarrhoea which is unusual for them, particularly in those over 55.

 ${f D}$  iscuss relevant history including antibiotic use and hospital stays within the last 3 months.

Immunosupression, including cancer, steroid therapy and diabetes increase the likelihood of *C difficile* infection.

Follow the 'Infectious Diarrhoea Specimen Advice: Quick Reference Guide for Primary Care'.

 ${f F}$ aecal specimen collection advice leaflet: 'How to collect a stool specimen at home' should be given.

 $oldsymbol{I}$ nitiate rehydration therapy whilst awaiting stool sample result.

Contact patient with result as soon as possible after *C difficile* positive result obtained.

Initiate antibiotic therapy with Metronidazole 400mg tds for 10-14 days as per *C difficile* treatment algorithmn.

Loperamide or other anti-motility agents should be avoided due to the risk of toxic mega-colon and bowel rupture.

Ensure patient is flagged as at risk of future *C diffficle* infection as relapse or reinfection is common and the patient is at increased risk with future antibiotic use.