

Common Infections

People with cystic fibrosis (CF) are at greater risk of getting lung infections because thick, sticky mucus builds up in their lungs, allowing germs to thrive and multiply. Lung infections are a serious problem for those with CF because they can lead to progressive lung damage.

Germs are microscopic organisms that can cause infection. They are found in the air, soil and water, and on food, plants and animals. Some germs can survive on surfaces for days and others cannot survive outside the body. Germs have favourite places they like to live, different ways to spread, and their own unique ways of causing infections. Some can survive in the natural environment, while others prefer living in people or animals. Some thrive in the cold, while others need warmth. All germs have one thing in common: when they find a place that is good for them to live, they set up a home for themselves and multiply.

Infections can either be spread through contact; either direct (touch) or indirect (surfaces), or through the air. Bacteria, viruses and moulds are examples of germs that cause infection in CF.

Common infections include

Pseudomonas aeruginosa (P. aeruginosa) is a common bacteria found in the lungs of people with CF. It comes in thousands of different strains and is found in many different environments. Some strains have become resistant to antibiotics and can be very hard to treat. People with CF may pick up pseudomonas infections from each other.

Staphylococcus aureus (Staph) is one of the most common organisms in CF lung infections. MRSA is a strain of Staphylococcus aureus that is resistant to commonly used antibiotics. MRSA can be spread through casual contact, like shaking hands, or by touching objects that have the bacteria on them, or through the air with coughing, laughing and sneezing.

Burkholderia cepacia complex (B. cepacia) lives in damp or wet places and is often difficult to treat once it infects the lungs. It can be spread via direct or indirect contact.

Nontuberculous mycobacteria (NTM) lives in soil, swamps and water sources. NTM can survive many disinfectants and severe environmental conditions. The bacteria have been found in growing numbers of people with CF and transmit easily from person to person.

Influenza (flu) is highly contagious, even among people who do not have CF. Although anyone can get the flu, people with CF can get much sicker, leading to a severe lung infection.

Aspergillus is a fungus that often lives in the airways of adolescents and young adults with CF. It causes an increase in CF symptoms, such as cough and wheeze, and is treated with steroids and anti-fungal medications.

How to reduce the risk of getting an infection

- Hand hygiene – washing hands with liquid soap and warm water and drying with a paper towel or clean towel.
- Vaccination (influenza vaccines are particularly important).
- Avoid sick people.
- Avoid high-risk environments, such as those with stagnant water, mould or damp soil.

Cross-infection

The latest medical data shows that people with CF can catch bacteria from each other, which can lead to worse symptoms and a decline in lung function. To reduce the risk of spreading or getting germs, it is recommended that:

- people who have CF keep at least 4 metres away from others with CF
- people with CF, who do not live together, avoid activities that put them in close physical contact with others with CF, including shaking hands, hugging or kissing, sharing common objects like pens, toys and computers or being together in enclosed or poorly ventilated places like cars.

Useful Resources

- Cross-infection policy www.cfwa.org.au/wp-content/uploads/2017/12/CFWA-Cross-Infection-Policy.pdf
- Pseudomonas Factsheet www.cfwa.org.au/wp-content/uploads/2017/12/CF-Fact-Pseudomonas.pdf
- Infection Control in Schools Factsheet www.cfwa.org.au/wp-content/uploads/2018/06/CF-Fact-Infection-Control-In-Schools1.pdf
- Cross-infection at School Factsheet www.cfwa.org.au/wp-content/uploads/2018/06/CF-Fact-Cross-Infection-at-School.pdf

Disclaimer: The information contained herein is provided in good faith. However accuracy of any statements is not guaranteed by Cystic Fibrosis WA. We provide the information on the understanding that persons take responsibility for assessing relevance and accuracy. Individuals are encouraged to discuss their health needs with a health practitioner.

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