

Cross Infection

The lungs of people living with CF are affected by thick, sticky mucus. This mucus can create a perfect environment for infections to thrive. These infections are usually harmless to people who don't have CF; however they can easily be shared between people with CF by direct contact or indirect contact from coughing, sneezing or touching a contaminated surface. This is referred to as cross infection.

Cross infection risks also apply to other people who are vulnerable to infections due to compromised immunity or individuals with other lung conditions such as bronchiectasis.

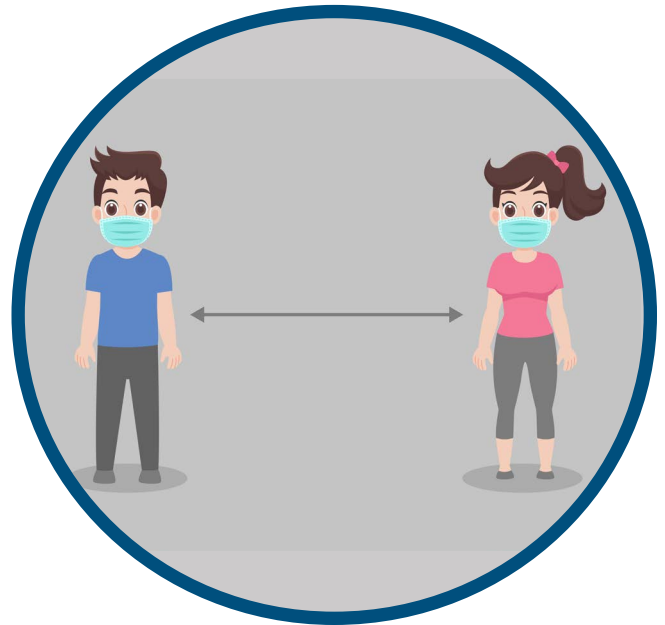
To reduce the risk of cross infection between people with CF, it is recommended that they do not come in close contact with each other and maintain a distance of **at least 4 metres apart**. This recommendation does not apply to siblings with CF.

Common infections

There are a number of bacteria, viruses and fungi that can cause infection in the lungs of people with CF. These are commonly found in warm, damp environments and can cause serious lung damage. Most infections are diagnosed with a sputum sample.

Some of the CF infections are:

- Pseudomonas aeruginosa (Pseudomonas)
- Staphylococcus aureus
- Burkholderia cepacia complex (B. cepacia)



- Nontuberculous Mycobacterium Abscessus (NTM)
- Aspergillus fumigatus (Aspergillus)

How to reduce the risk of cross infection

- Hand hygiene – wash hands with liquid soap, warm water and dry thoroughly. Alcohol-based hand wash is just as effective when used properly. Use hand hygiene when touching commonly touched surfaces such as doorhandles or lift buttons.
- Stay at least 4 meters away from anyone with CF (excluding siblings).
- Avoid contact with other people with CF in enclosed spaces, e.g. a car or a poorly ventilated room.
- Avoid sharing drinks, utensils, or other equipment with other people with CF.
- Wear a facemask when around other people with CF, such as in clinic.

- Avoid any contact with people with CF who are unwell as the risk of sharing infections is greater.
- Follow any additional cross infection guidelines.

Hospital precautions

Cross infection is taken very seriously among health professionals, and the following practices are put in place to protect people with CF:

- PPE for staff - gloves, gowns, masks and eye protection when required.
- PPE for people with CF - masks are worn in the hospital when accessing common areas such as clinic waiting rooms.
- Good hand hygiene is encouraged for staff and patients.
- Avoid sharing hospital rooms or bathrooms with people with CF or other respiratory conditions such as bronchiectasis.
- People with CF should not be in common spaces in the hospital (e.g. gyms, playrooms etc) at the same time.

Transplants & cross infection

Following lung transplantation, or any other organ transplantation, the risk of cross infection remains as the impact of immunosuppressant medications make individuals more prone to infection. Other transplant recipients may also continue to carry bacteria or fungi in their sinuses, upper airway or newly transplanted lungs which might pose a risk to individuals who have had a lung transplant.

For these reasons, it is important to continue to avoid close contact with other people with CF, including those who have received a transplant, either recently or many years ago. Any concerns or precautions should be discussed with the transplant team.

Useful Resources

- [CFWA factsheets](#)
- [Common CF Bugs](#) (CF Physio)
- [CFWA Infection Control Policy](#)

Last reviewed October 2023.

Cystic Fibrosis WA
The Niche
11 Aberdare Road
Nedlands WA 6009

T: 08 6224 4100
E: info@cfwa.org.au

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