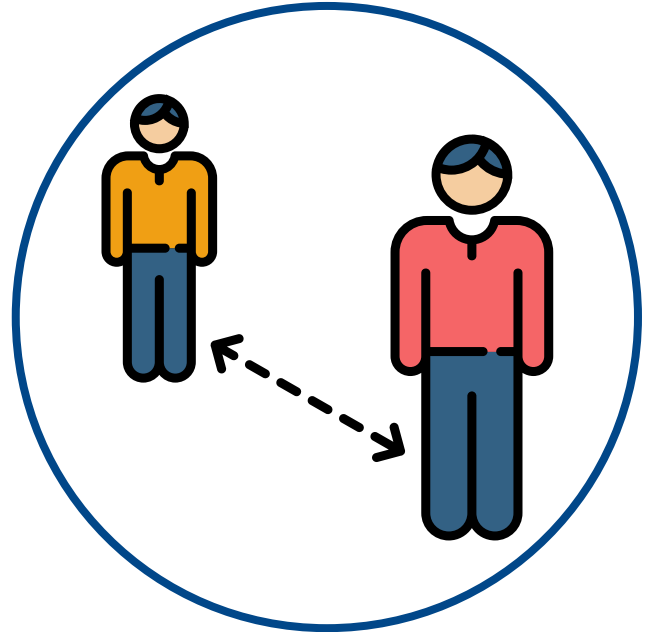


## Cross Infection

The lungs of people living with CF are affected by thick, sticky mucus which can create a perfect environment for germs to grow.

These germs can be picked up from the environment, such as dirty water or soil, and can be spread to other people with CF by either direct (touching, hugging) or indirect contact (coughing, sneezing, touching a contaminated surface). This is referred to as cross infection. Cross infection risks also apply to other people with chronic lung conditions or impaired immunity.



### Common infections

There are a number of bacteria, viruses and fungi that can cause infection in the lungs of people with CF and can cause serious lung damage.

Some of the common infections are:

- *Pseudomonas aeruginosa* (*Pseudomonas*)
- *Staphylococcus aureus* (*Staph*)
- *Burkholderia cepacia* complex (*B. cepacia*)
- Nontuberculous *Mycobacterium Abscessus* (NTM)
- *Aspergillus fumigatus* (*Aspergillus*)

### Reducing the risk of cross infection

To reduce the risk of cross infection, people with CF should avoid close or prolonged contact with each other and endeavour to maintain a distance of 4m apart, particularly in small, enclosed spaces (this does not include people living in the same house).

People with CF who live together e.g. siblings, should avoid sharing respiratory equipment and airway clearance devices. Performing airway clearance at different times, in different rooms can help decrease the spread of germs.

### Hospital precautions

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

- Personal protective equipment (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 before and after touching equipment or surfaces.
- Regular cleaning of frequently touched equipment or surfaces.

- People with CF should not share hospital rooms or bathrooms with other people with CF or other respiratory conditions such as bronchiectasis.
- People with CF should not be in enclosed common spaces in the hospital (e.g. gyms, playrooms etc) at the same time and should endeavour to manage cross infection risks in shared waiting rooms.

## Transplant & cross infection

Cross infection remains a risk for people with CF even after having had a lung transplant. Following lung transplantation, individuals with CF can still carry bacteria or fungi in their sinuses, upper airway or newly transplanted lungs which might pose a risk to others.

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

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