# **CLOSTRIDIUM DIFFICILE**

# Compiled by

# **Campbell M Gold**

CMG Archives http://www.campbellmgold.com

(2013)

--()--

# **IMPORTANT**

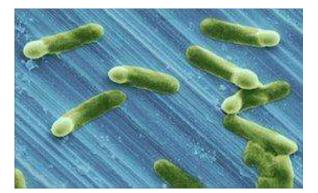
The health information contained herein is not meant as a substitute for advice from your physician, or other health professional. The following material is intended for general interest only; and it should not be used to diagnose, treat, or cure any condition whatever. If you are concerned about any health issue, symptom, or other indication, you should consult your regular physician, or other health professional. Consequently, the Author cannot accept responsibility for any individual who misuses the information contained in this material. Thus, the reader is solely responsible for all of the health information contained herein. However, every effort is made to ensure that the information in this material is accurate; but, the Author is not liable for any errors in content or presentation, which may appear herein

--()--

#### Introduction

A clostridium difficile infection (CDI) is a type of bacterial infection that can affect the digestive system.

It most commonly occurs in people who have recently had a course of antibiotics and are in a health care setting (hospitals, care homes, etc).



C. difficile bacteria

--()--

### Who is Affected?

As clostridium difficile infections are usually caused by antibiotics, the majority of cases happen in a healthcare environment, such as a hospitals or care homes.

Older people are most at risk from infection, and individuals over the age of 65 account for three quarters of all cases.

Recently, the number of clostridium difficile infections has fallen - there were 17,414 reported cases in England during 2011, compared to 52,988 in 2007.

Unfortunately, a new strain of the C. difficile bacteria, NAP1/027, has emerged in recent years, and this causes a more severe infection.

There has also been an increase of clostridium difficile infection cases occurring outside of healthcare settings, and this is known as "community-acquired clostridium difficile infection".

--()--

#### Antibiotics are the main cause of C. difficile infection

If an individual takes antibiotics for any infection, as well as killing the bacteria that caused the infection, the antibiotics will also kill many of the needful bacteria that live in the gut. However, C. difficile bacteria are not killed by many types of antibiotic. Consequently, if the needful bacteria are killed off, this allows C. difficile to multiply in greater numbers and to produce toxins, which produce the final symptoms and associated problems.

Even the briefest exposure to any single antibiotic can cause C difficile colitis.

--()--

#### Symptoms

Symptoms of C. difficile bacteria can include one or more of the following:

- Blood in the faeces
- Dehydration
- Diarrhoea
- Feeling sick
- Gas build up
- High temperature (fever) of or above 38C (100.4F)
- Inflammation of the bowel and development of colitis
- Loss of appetite
- Painful abdominal cramps
- Weight loss

Clostridium difficile infection can also cause life threatening complications such as severe swelling of the bowel due to a build-up of gas (this type of swelling is known as" toxic megacolon").

--()--

#### Causes

Spores of the C. difficile bacteria can be passed out of the human body in faeces and can survive for many weeks, and sometimes months, on objects and surfaces.

If and individual touches a contaminated object or surface and then touches their nose or mouth, they can ingest the bacteria

The C. difficile bacteria do not typically cause any problems in healthy individuals. However, antibiotics seriously interfere with the balance of "good" intestinal flora.

When this happens, C. difficile bacteria can multiply and produce toxins which cause symptoms such as diarrhoea, etc.

--()--

# **Complementary Treatment**

- Acidophilus (probiotic)
- Activated Charcoal
- garlic Oil Caps (1,000 mg strength)
- Water Therapy (including appropriate electrolytes to prevent dehydration)

The following may be indicated:

- Mag Phos (a biochemic tissue salt will aid in easing digestive discomfort)
- Vit C
- Vit B-Complex
- Vit D
- Omega 3, 6, 9 combination, 1200-2400 mg, 3 x daily
- Good multivitamin

Other considerations:

- Slippery elm has been noted to repair and sooth damage caused by Clostridium difficile infection
- Colloidal silver and oregano combined with probiotics can help eliminate persistent C difficile and restore a healthy balance of intestinal flora
- L-Glutamine (amino acid) 3,000-12,000 mg/day to repair calm intestinal inflammation, and to repair damage to intestinal mucosa. This also helps to support gut associated immune function
- Papaya, carrot, and raw cabbage juice have been known to be beneficial
- A good diet would include steamed vegetables, rice, and natural cottage cheese

--()--

#### **Bed Rest**

Bed rest and the elimination of stress and tension are very important when dealing with Clostridium difficile infection. Additionally, audio relaxation and healing programs may also help.

--()--

## Avoid

Things to avoid include:

- Caffeine
- Alcohol
- Smoking
- Meat products
- Fatty products
- Refined sugar

• Salty foods

--()--

## Allopathic Treatment

A mild clostridium difficile infection is usually controlled by withdrawing treatment with the antibiotics causing the infection.

More severe cases are treated with the following antibiotics:

- vancomycin
- metronidazole

The condition usually responds well to treatment, with the condition improving in 2-3 day, and clearing up completely within 7-10 days.

However a return of symptoms is common occurring in approximately 1 in 4 cases. A relapse will require further treatment - some individuals have two or more relapses.

Life threatening cases may need surgery to remove damaged sections of the bowel - this is typical of around 1 in a 100 cases.

Severe cases of clostridium difficile infection, especially in people who are already very ill, can be fatal.

--()--

## Prevention

Though C. difficile bacteria spread very easily, and can usually be prevented by practising good hygiene - especially in healthcare environments. Good practise includes washing hands regularly and cleaning surfaces using products containing bleach.

Health setting visitors can reduce the risk of spreading infection by washing their hands before and after entering a ward.

Alcohol hand gel is **<u>not</u>** effective against C. difficile spores; consequently, the use of soap and water is recommended.

End

--()--

http://www.campbellmgold.com

25012013