



# *Clostridioides difficile* infection, *Escherichia coli* bacteraemia, *Staphylococcus aureus* bacteraemia and Surgical Site Infection in Scotland

July to September (Q3) 2021

An Official Statistics publication for Scotland

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### About this release

This release by Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland provides data for common healthcare infections in Scotland. These are an important cause of severe illness, death, and higher treatment costs. The published data can be used to improve care of patients. *Clostridioides difficile infection* (CDI) can cause diarrhoeal illness, especially in vulnerable patients who have received antibiotics. *Escherichia coli* bacteraemia (ECB) and *Staphylococcus aureus* bacteraemia (SAB) are both life-threatening bloodstream infections. Surgical site infections (SSI) are bacterial infections of surgical operation sites which can have serious outcomes for patients.

# **Main Points**

### Total cases for July to September (Q3) 2021

- There were 332 CDI cases, of which 73.2% (243) were healthcare infections. In the previous quarter there were 277 cases.
- There were 1,169 ECB cases, of which 51.6% (603) were healthcare infections. In the previous quarter there were 1,103 cases.
- There were 399 SAB cases, of which 66.9% (267) were healthcare infections. In the previous quarter there were 408 SAB cases.
- Epidemiological data for SSI are not included for this quarter due to the pausing of surveillance to support the COVID-19 response.

### **NHS Boards requiring further analysis**

- The number of healthcare CDI cases in NHS Ayrshire & Arran was markedly higher than the average within Scotland in 2021 Q3. This needs to be looked at further as per the exception reporting process.
- The number of healthcare ECB cases in NHS Fife was markedly higher than the average within Scotland in 2021 Q3. This needs to be looked at further as per the exception reporting process.
- The number of healthcare ECB cases in NHS Forth Valley was markedly higher than the average within Scotland in 2021 Q3. This needs to be looked at further as per the exception reporting process.
- The number of community ECB cases in NHS Ayrshire & Arran was markedly higher than the average within Scotland in 2021 Q3. This needs to be looked at further as per the exception reporting process.

The table shows NHS boards' rates for each healthcare and community infection in 2021 Q3.

Table: Quarterly rates for healthcare infections per 100,000 total occupied beddays and community infections per 100,000 population, 1 July to 30September 2021.

NHS Board	Healthcare CDI	Healthcare ECB	Healthcare SAB	Community CDI	Community ECB	Community SAB
Ayrshire and Arran	26.8 +	49.0	15.7	9.7	63.6 +	18.3
Borders	10.1	47.2	23.6	3.4	62.0	20.7
Dumfries and Galloway	23.7	52.2	14.2	5.4	58.9	13.4
Fife	9.5	60.3 +	16.6	4.2	42.4	9.5
Forth Valley	11.5	67.3 +	22.9	0.0	31.1	9.1
Golden Jubilee	0.0	16.6	24.9	-	-	-
Grampian	11.5	35.5	18.1	5.4	28.5	7.5
Greater Glasgow and Clyde	17.9	33.9	19.6	7.0	42.2	6.0
Highland	18.5	24.2	11.4	7.4	29.7	12.4
Lanarkshire	20.7	45.0	15.0	5.4	49.7	10.8
Lothian	17.8	33.9	18.2	9.6	36.1	8.3
Orkney	0.0	74.2	0.0	17.7	35.4	0.0
Shetland	40.7	40.7	81.4	0.0	17.3	17.3
Tayside	9.8	54.4	23.2	4.8	37.1	9.5
Western Isles	0.0	83.7	0.0	15.0	44.9	15.0
Scotland	16.7	41.4	18.3	6.5	41.1	9.6

#### Key

+ Markedly higher than average infection rate

# Background

The data used for this report is part of the mandatory surveillance in Scotland. ARHAI Scotland supports NHS boards to analyse their data. Local monitoring in hospital and community settings is required to reduce these infections.

### Contact

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# **Further Information**

Find out more in the **full report**. The data from this publication is available to download **from our web page** along with a background information and metadata document. Please see **News and Updates section** of our website for more details.

For more information on types of infections included in this report, please see the CDI, ECB, SAB and SSI pages.

The next release of this publication will be April 2022.



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