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Washing hands best defence

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Chen said.
"Cases are happening all of the time. We've seen increases in the past couple of months, but we often see increases in the winter time."

While C. difficile, which first turned up in hospitals in the 1970s, is not uncommon, infectious disease specialists are concerned because it appears to have mutated into a lethal strain.

Dr. Allison McGeer, the head of infection control at Toronto's Mount Sinai Hospital, said strains of C. difficile have become stronger and more resistant to antibiotics. Although it is not clear why the bug has become more deadly, Dr. McGeer suggests it's a combination of broad-spectrum antibiotic use, less attention to hospital cleanliness and the fact hospitals treat much sicker patients.

While Dr. Chen stresses the local medical community struggles with the C. difficile bacteria on an ongoing basis, not everyone views it as a public health issue.

It's not being viewed as a serious problem by the York's health department because it has not been informed about any cases in the region, said Ken Brown, the region's manager of infectious disease, said.

While C. difficile is not one of the province's 75 reportable disease list, doctors do call the region's health department if cases pop up.

"We do not have any outbreaks in York Region at this time," Mr. Brown said.

Southlake Health Centre last experienced C. difficile deaths in 2004. During the course of a year, the bacteria killed three people at the Newmarket hospital, the last death in July 2004, Brigitte Boaretto, Southlake's manager of infection prevention and control, reported.

C. difficile is found in facilities such as hospitals and long-term care centres. Symptoms include diarrhea, fever, nausea and abdominal pain, while blood may be detected in the stool. The bacteria cannot be spread through the air. Rather, it's spread when a person touches a contaminated surface and then touches his mouth.

The best way to avoid the bacteria is to wash your hands often, isolate ill patients and monitor them, Mr. Brown said.

The risk of coming down with C. difficile while a patient at Southlake remains low, Ms Boaretto said. As well, Southlake has a procedure that stipulates any patient who has diarrhea at the time of admission or develops it while in the hospital is placed on contact precautions, and tested for the bacteria.

Anyone who tests positive for C. difficile is followed daily by staff from the infection prevention and control staff, Ms Boaretto said.

While hospitals are not required to report incidents of C. difficile to their local health department, Southlake does share its number of cases with York Region Public Health department on a bi-monthly basis.

Although C. difficile has not claimed lives at Markham-Stouffville Hospital recently, if and when the bacteria turns up, treatment is prompt and patients are monitored is ongoing, Leslie Walsh, the hospital's manager of marketing, said.

"We monitor it vigilantly," Ms Walsh said. "There has been no noticeable changes in frequency lately. It varies from day to day. As soon as the bacteria is identified, infection control professionals are consulted."

For more information about C. difficile, call the Health Connection Line at 1-800-361-5653.