

Preventing the Transmission of Community-Acquired, Methicillin-Resistant  
*Staphylococcus aureus* (CA-MRSA) with Nasal Decolonization:  
An Evidence-Based Approach.

By:

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Purpose:

Due to the alarming number of patients diagnosed with CA-MRSA infections after exposure to this bacterium through a family member or other close personal contact, the purpose of my project was to determine the efficacy of nasal decolonization with mupirocin (Bactroban) as a primary method for reducing the transmission of CA-MRSA among family members and close personal contacts.

Data Sources:

CINAHL, MEDLINE, and PubMed were searched using the keywords: MRSA, CA-MRSA, mupirocin (Bactroban), decolonization, and prevention. The search was limited to English, full text, publication date 1999-2009, and research articles only. The National Institutes of Health clinical trials website, the Centers for Disease Control website, and the Cochrane Reviews were searched. Other relevant articles were hand searched.

Conclusions:

Current evidence does not support the routine use of intranasal mupirocin for CA-MRSA prevention in the outpatient setting. Intranasal mupirocin has the potential to worsen antibiotic resistance and may expose the patient to unnecessary side effects and expenses.

Implications for Practice:

Family care providers should not routinely prescribe intranasal mupirocin. Patients at-risk for a serious CA-MRSA infection and those with recurrent CA-MRSA infections should be evaluated by an infectious disease specialist before intranasal mupirocin is ordered.