



PATIENT INFORMATION

Patient Information about Panton Valente Leucocidin Staphylococcus aureus producers (PVLs)

For Practice Nurses to give to patients in the community or Mail to Patient or for collection by Carer.

What is PVL?

PVL is a toxin produced by certain types of *Staphylococcus aureus*. The types of *Staphylococcus aureus* that produce PVL can be an antibiotic sensitive *Staphylococcus aureus* or one that can be resistant to certain antibiotics and this is called MRSA.

The PVL toxin can kill white blood cells and cause damage to skin and deeper areas such as muscle.

In general PVL causes boils which may be multiple and spread within families.

Very rarely PVL infections can spread in the blood stream and cause serious disease that requires urgent hospital admission.

How is PVL spread?

The most important route is likely to be through broken skin from contaminated surfaces.

The risk of acquiring the infection is increased with the five C's:

- *Close Contact* – playing contact sports such as rugby or skin-to-skin contact with an infected family member or friend.
- *Contaminated items* – touching something which is contaminated with the bacteria, e.g. gym equipment, towels or razors.
- *Crowding* – living in crowded conditions increases the chance of passing on the infection, e.g. military accommodation, prisons and boarding schools.
- *Cleanliness* – an unclean environment will encourage the bacteria to spread.
- *Cuts and grazes* – having a cut or graze will allow the bacteria to enter the body.

How is PVL treated?

Small boils will go of their own accord. Larger boils may need antibiotics, by mouth, from your GP.

Large abscesses may need to be drained – this involves making a small cut in the skin with a sterile instrument and allowing the pus to drain from the abscess. This may be followed by oral antibiotics.

If there are associated symptoms such as a temperature or a very large abscess then your GP will arrange hospital admission for antibiotics through a drip.

How can I prevent the spread of PVL?

Once the infection has resolved, your body must be cleared of any PVL. Your doctor will prescribe a topical treatment, e.g. chlorhexidine, to wash yourself with and an antibacterial nasal ointment both to be used for 5-7 days. Your family members may also have to follow this system.

You can also follow the advice below:

- Washing hands with liquid soap and water and drying thoroughly afterwards.
- Maintaining a clean home.
- Regular laundry of clothes, towels and bedding at 60 degrees.

For more information

In the community – Public Health England (PHE) – 0300 3038162

<https://www.gov.uk/government/collections/panton-valentine-leukocidin-pvl-guidance-data-and-analysis>

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