



Banner Thunderbird
Medical Center

Ask the Expert- Clostridium difficile (C. diff)

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Q: What is Clostridium difficile, or C. diff?

A: C. diff is an anaerobic spore-forming bacteria, typically found in the digestive tract. It is now recognized as the major causative agent of colitis (inflammation of the colon) and diarrhea that may occur following antibiotic intake.

Q: What are the symptoms of C. diff?

A: Diarrhea is the most common symptom. Mucous-like stool is often present as well. Other symptoms may include blood in stool, fever, abdominal cramps and/or leukocytosis. Symptoms can occur as early as 1-10 days after beginning the antibiotic, or as late as 2-6 weeks after antibiotic therapy is completed.

Q: Are certain groups of people more at risk than others?

A: Individuals at higher risk of becoming infected include those on long-term antibiotic therapies, people of advanced age, women, patients undergoing chemotherapy, people with inflammatory bowel disease, patients in areas with high C. diff rates, and people with renal disease.

C. diff is more common in people who are patients at hospitals and nursing homes where antibiotics are received frequently. Individuals who are treated with antibiotics as outpatients have a much smaller risk of developing a C. diff infection.

Q: What steps can be taken to prevent a C. diff infection?

A: Antibiotic therapy is the biggest risk factor for the disease. Therefore, taking antibiotics only when absolutely necessary is the most effective measure in preventing C. diff infection. The C. diff bacteria are found in feces of those infected with the disease. People can become infected if they touch items or surfaces that are contaminated with feces and then touch their mouth or mucous membranes. Therefore, good hand washing practice is also essential to prevent the C. diff infection.

Q: How is C. diff treated?

A: No therapy is required for individuals who are asymptomatic. In patients with mild diarrhea, no fever, and moderate abdominal pain, discontinuation of antibiotics- if possible- is often enough to alleviate symptoms and stop diarrhea. In cases with severe diarrhea and established colitis, the patient should receive specific antibiotics (either metronidazole or vancomycin) administered orally for 10-14 days. Research has shown that 95% of patients respond well to this treatment. However, a small percentage do not respond to this aggressive medical therapy and sometimes require surgical intervention.