

Did you know?

- The most common sign of NHAP is rapid breathing.
- Green or yellow nasal discharge does not indicate NHAP.
- Coughing up green or yellow phlegm does not indicate NHAP.
- Pneumonia can follow a viral infection such as influenza.
- Influenza vaccination for residents, staff and family members is an important way to prevent pneumonia in the elderly.
- Proper handwashing and good respiratory etiquette will prevent the spread of respiratory infections.
- Antibiotics are not risk-free. Antibiotics can lead to infection with *C. difficile* (severe diarrhea) and an increased chance that infections later on will be resistant.

USE ANTIBIOTICS WISELY

- ✓ WHEN NEEDED
- ✓ AS DIRECTED

Antimicrobial Stewardship in Continuing Care



Frequently Asked Questions

Nursing Home Acquired Pneumonia

What is Nursing Home Acquired Pneumonia (NHAP)?

Pneumonia is an infection of the lungs. Pneumonia is most often caused by bacteria, but viruses and fungi can also cause pneumonia. When a person has pneumonia, fluid collects in the lungs and makes it hard for oxygen to get into the body.

Pneumonia that occurs in a continuing care centre is called Nursing Home Acquired Pneumonia or NHAP.

What are the symptoms of NHAP?

Rapid breathing is the most important sign that a continuing care resident has NHAP. Other symptoms are fever, coughing, shortness of breath and chest pain.

An examination by the nurse or doctor will show whether the infection is NHAP. Sometimes a chest x-ray will be done to help with the diagnosis.

Does green or yellow nasal discharge or sputum indicate NHAP?

Green or yellow nasal discharge or sputum can happen with many infections including the common cold, influenza or pneumonia. The color change shows that the body is fighting an infection. The symptoms listed above show specifically whether the resident has NHAP.

Is NHAP serious?

Pneumonia is a very serious health problem, especially among the elderly. Pneumonia can come on suddenly and get worse very quickly.

Early treatment of NHAP is very important. Report any symptoms of NHAP to nursing staff right away. Residents who have lost some of their mental abilities may not be able to tell you how they are feeling. Family members and health care aides are often the first to notice symptoms.

How is NHAP treated?

NHAP is most often treated with antibiotics. Rest and drinking plenty of fluids will help the body to fight the infection. Extra fluids may be given under the skin if the resident cannot drink enough fluids by mouth. Sometimes oxygen is needed.

Antibiotics should not be given unless the resident has NHAP. Antibiotics are not needed for most sore throats and coughs, colds, influenza and other respiratory infections caused by viruses. Taking antibiotics when they are not needed can lead to other serious medical problems such as diarrhea, yeast infections and infections later on that cannot be treated with antibiotics.

Is hospitalization needed?

Most of the time hospitalization is not needed. Residents may need to be hospitalized if they have trouble breathing, other medical problems or if their symptoms are getting worse.

Is NHAP preventable?

Pneumococcal vaccine for residents will prevent infection from some of the bacteria that can cause NHAP. Annual influenza vaccination is also recommended for residents, staff and family members since pneumonia often occurs after a case of influenza.

What can I do?

Do not visit or come to work if you have influenza or are not feeling well.

Follow guidelines at the continuing care centre for hand hygiene. Handwashing is the best way to stop the spread of infections.

Practice good respiratory etiquette. Cover your mouth and nose with a tissue when you sneeze or cough. If you do not have a tissue, cough or sneeze into your sleeve, not your hands. Throw away the used tissue promptly.

Aspiration Pneumonia

What is aspiration pneumonia?

Sometimes pneumonia is due to inhaling food or other objects into the lungs. This can lead to an infection and is known as aspiration pneumonia. Aspiration pneumonia is a problem for the elderly because they may have trouble chewing or swallowing food.

A clinical examination and medical history will show whether pneumonia is due to inhaling something into the lungs. Sometimes a chest x-ray will be done. Aspiration pneumonia is most often treated with antibiotics.

What can I do?

Prevention is best. Residents who have trouble chewing or swallowing should eat soft foods, eat sitting up and keep the mouth moist. Remind the resident to clear food from the mouth with their tongue. Make sure any dental problems are treated.