

***Clostridioides difficile* infection, *Escherichia coli* bacteraemia, *Staphylococcus aureus* bacteraemia and Surgical Site Infection in Scotland**

January to March (Q1) 2024

An Official Statistics publication for Scotland

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About this release

This release by Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland provides data for common healthcare infections in Scotland. These are an important cause of severe illness, death, and higher treatment costs. The published data can be used to improve care of patients. *Clostridioides difficile* infection (CDI) can cause diarrhoeal illness, especially in vulnerable patients who have received antibiotics. *Escherichia coli* bacteraemia (ECB) and *Staphylococcus aureus* bacteraemia (SAB) are both life-threatening bloodstream infections. Surgical site infections (SSI) are bacterial infections of surgical operation sites which can have serious outcomes for patients.

Main Points

Total cases for January to March (Q1) 2024

- There were 295 CDI cases, of which 67.8% (200) were healthcare infections. In the previous quarter there were 302 cases.
- There were 1,069 ECB cases, of which 52.9% (566) were healthcare infections. In the previous quarter there were 986 cases.
- There were 419 SAB cases, of which 64.7% (271) were healthcare infections. In the previous quarter there were 438 SAB cases.
- Epidemiological data for SSI are not included for this quarter. Surveillance of SSI was paused in 2020 to support the COVID-19 response and has not yet resumed.

NHS boards requiring further analysis

- These need to be looked at further as per the exception reporting process.
 - The number of healthcare associated CDI cases in NHS Highland were markedly higher than the average within Scotland in 2024 Q1.
 - The number of community associated CDI cases in NHS Highland were markedly higher than the average within Scotland in 2024 Q1.
 - The number of healthcare associated ECB cases in NHS Tayside were markedly higher than the average within Scotland in 2024 Q1.
 - The number of community associated ECB cases in NHS Lanarkshire were markedly higher than the average within Scotland in 2024 Q1.
- The table shows NHS boards' rates for each healthcare and community infection in 2024 Q1.

Table: Quarterly rates for healthcare infections per 100,000 total occupied bed days and community infections per 100,000 population, 1 January to 31 March 2024.

NHS board	Healthcare CDI	Healthcare ECB	Healthcare SAB	Community CDI	Community ECB	Community SAB
Ayrshire & Arran	15.6	42.3	17.3	7.7	48.4	16.5
Borders	12.3	33.8	6.1	0.0	41.3	24.1
Dumfries & Galloway	17.1	27.8	21.4	16.6	55.2	11.0
Fife	4.4	41.7	13.2	4.3	31.4	14.1
Forth Valley	12.4	50.9	19.9	0.0	33.2	12.0
Golden Jubilee	0.0	14.9	7.4	-	-	-
Grampian	10.1	32.5	23.1	6.9	32.5	14.5
Greater Glasgow & Clyde	12.2	31.5	14.6	6.8	31.4	8.2
Highland	+ 24.5	15.9	15.9	17.4	38.5	+ 6.2
Lanarkshire	18.0	39.9	20.6	4.2	+ 48.1	9.0
Lothian	11.9	32.4	13.9	10.2	32.0	9.3
Orkney	0.0	66.8	0.0	18.3	0.0	0.0
Shetland	127.0	127.0	127.0	0.0	17.5	34.9
Tayside	5.0	+ 48.8	23.2	2.9	46.6	11.7
Western Isles	0.0	69.6	13.9	0.0	30.8	0.0
Scotland	12.6	35.6	17.0	7.0	37.1	10.9

Key

+ Markedly higher than average infection rate, after accounting for NHS board population size/activity.

Background

The data used for this report is part of the mandatory surveillance in Scotland. ARHAI Scotland supports NHS boards to analyse their data. Local monitoring in hospital and community settings is required to reduce these infections.

Contact

Shona Cairns, Consultant Healthcare Scientist, ARHAI Scotland

NSS.ARHAIdatateam@nhs.scot

Further Information

Find out more in the [full report](#). The data from this publication is available to download [from our web page](#) along with a background information and metadata document.

For more information on types of infections included in this report please see the [CDI](#), [ECB](#), [SAB](#), and [SSI](#) pages.

Our statistical practice is regulated by the Office for Statistics Regulation (OSR).

The next release of this publication will be October 2024.



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