Hamilton Health Sciences

ADULT RECURRENT *C. difficile* Associated Diarrhea Evaluation & Management

Unexplained and new-onset ≥3 unformed stools in 24h
AND
Prior C. difficile infection (CDI) history
(If no prior CDI history, see pathway for Initial CDI)

History, physical examination
Laboratory Tests:
CBC, Electrolytes, creatinine, albumin,
Stool sample for C. difficile toxin x 1
Place in Contact Precautions until discontinued by Infection Prevention & Control

Test stool for *C. difficile* toxin gene by LAMP

Hemodynamically stable, no signs of shock
AND
No suspicion of ileus or toxic

No empiric therapy needed

Hypotension
OR
signs of shock
OR
suspected ileus or toxic megacolon

Empiric therapy needed
See **Fulminant CDI** in pathway for Initial CDI

***C. difficile* toxin gene test result**

Negative
investigate other causes for diarrhea

Positive

- ☑ **Discontinue anti-motility agents** (e.g. loperamide) / **laxative** (e.g. senna, lactulose, milk of magnesia) / **stool softener** (e.g. docusate sodium) (CIII)
- ☑ **Discontinue/narrow offending antibiotic***, if possible (AII)
- ☑ **Reassess use of proton pump inhibitors (e.g. lansoprazole, omeprazole, pantoprazole)**

First recurrence (i.e. 2nd episode):

If metronidazole alone was used to treat 1st episode,
Vancomycin 125 mg PO qid x 10 d
OR
If vancomycin was used to treat 1st episode,
Vancomycin 125 mg PO qid x 14 d
then 125 mg PO bid x 7 d
then 125 mg PO od x 7 d
then 125 mg po q2d x 14 d

Second or subsequent recurrence (i.e. 3rd episode or greater):

Consult Infectious Diseases

Vancomycin 125 mg PO qid x 14 d
then 125 mg PO bid x 7 d
then 125 mg PO od x 7 d
then 125 mg po q2d x 14 d
AND
Consider fecal transplant

*** Antibiotics and Risk for CDI**

High
Cephalosporins
Beta-Lactams – broad spectrum
Fluoroquinolones
Clindamycin

Medium
Beta-lactams – narrow spectrum
Carbapenems
Trimethoprim-Sulfamethoxazole
Macrolides

Low
Vancomycin IV
Linezolid
Nitrofurantoin
Metronidazole
Tetracyclines
Daptomycin
Tigecycline

Please Note:

- ☑ Wash hands with soap & warm water, if hand washing sink is available, or use alcohol based hand sanitizer after removing gloves DO NOT use patient sink
- ☑ Terminal cleaning of patient room and bathroom as per Infection Prevention & Control Policy and Procedures
- ☑ **DO NOT submit repeat stool for *C. difficile* toxin testing; there is no test of cure as test will remain positive**
- ☑ Inform Long Term/Home Health Care of Infection Control and environmental disinfection strategy
- ☑ Order accurate stool charting
- ☑ Contact telephone request service from the exceptional access program for oral vancomycin approval prior to discharge (1-866-811-9893)

Approved HHS Antimicrobial Subcommittee 2010 – Updated August 2011, Feb 2013, June 2017, March 2018