



State of New Jersey

DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF EPIDEMIOLOGY, ENVIRONMENTAL AND OCCUPATIONAL HEALTH
PO BOX 369
TRENTON, N.J. 08625-0369

JON S. CORZINE
Governor

www.nj.gov/health

FRED M. JACOBS, M.D., J.D.
Commissioner

November 5, 2007

In light of concerns that have surfaced recently regarding MRSA, the New Jersey Department of Health and Senior Services (NJDHSS) supports the New Jersey Interscholastic Sports Athletic Association's efforts to educate athletic directors, trainers, and coaches regarding measures that can be undertaken to prevent MRSA infections from occurring among high school athletes. Those involved in interscholastic sports should familiarize themselves with the following:

- **MRSA is not new.**

Methicillin-resistant *Staphylococcus aureus* infection, or MRSA, is not a new type of infection. MRSA cases have been identified in both hospitals and communities for decades. Although MRSA infections are more common in individuals who have a recent link to the healthcare system, MRSA infections have been increasing in the community in recent years.

- **MRSA is treatable.**

Up to 30% of the general population is colonized with *Staphylococcus aureus*, meaning they can carry the bacteria on their skin or in the nose without being ill. Approximately 1% of the general population is colonized with the *Staphylococcus aureus* bacterium that is resistant to penicillin-related antibiotics (MRSA). Although MRSA infections do not respond to penicillin-related antibiotics, these infections can be treated with many other types of antibiotics. Often times, in the case of skin infections, antibiotics are not even needed if appropriate wound care (i.e., incision and drainage) is performed by a health care provider.

- **MRSA is rarely fatal.**

MRSA infections acquired in the community (meaning not associated with a recent hospitalization or surgery) usually appear as a skin or soft tissue infection, such as a pimple, boil or abscess (many people claim it looks like a spider bite). MRSA cases are rarely fatal; death occurs when an untreated wound becomes a more serious infection, such as a blood infection. Referral to a healthcare provider for prompt evaluation of suspicious skin lesions can prevent more severe infections.

- **MRSA is spread through direct contact.**

MRSA is primarily spread through direct person-to-person contact with draining lesions from an infected person. As such, keeping any wounds bandaged and covered and practicing prudent hygiene are important ways to prevent transmitting MRSA. MRSA can also be spread by touching objects that have been soiled with drainage from an infected wound, such as soiled bandages or contaminated athletic equipment, although this is less common than direct person-to-person spread. The risk of transmitting MRSA in the classroom is even smaller, where there is less physical contact with draining wounds and less frequent sharing of contaminated personal items.

- **Isolated cases of MRSA are not required to be reported to public health authorities.**

Doctors, schools, parents, faculty and employees are not required to report single or isolated cases of MRSA to public health authorities. MRSA is reportable only when a cluster or outbreak is suspected. The number of cases that may indicate a cluster or outbreak differs according to several factors, such as the length of time between confirmed cases, the number of people potentially exposed and the source of infection. As a general rule, if there are two or more non-household cases diagnosed within 14 days of each other, the local health department should be notified. After notification is made, the local health department will coordinate an investigation to determine if a cluster or outbreak might be occurring. The local health department can also provide education materials, infection control resources and environmental recommendations to assist with reinforcing MRSA prevention messages.

The document, "Sports Hygiene - Guideline to Minimize Infectious Diseases: Position Statement and Guidelines" developed by the National Federation of State High School Associations, contains recommendations that would be consistent with NJDHSS recommendations for reducing MRSA infections in school athletic settings. School athletic staff who would like more information about MRSA and methods for preventing and controlling its spread are encouraged to contact their local health departments and review the many resources available through the following websites:

NJDHSS Antimicrobial Resistance Home Page, which has links to MRSA educational materials and resources for professionals, including a MRSA fact sheet, recommendations for preventing and controlling the spread of MRSA in schools, and the brochure, "Preventing Skin Infections in School and Athletic Settings"

<http://www.state.nj.us/health/cd/mrsa/index.shtml>

Centers for Disease Control and Prevention (CDC), "MRSA in Schools" feature

<http://www.cdc.gov/Features/MRSAinSchools/>

Tacoma-Pierce County (Washington) Health Department, MRSA Toolkit for Middle and High Schools, with specific information targeting athletic departments

<http://www.tpchd.org/page.php?id=364>

Mecklenburg County (North Carolina) Health Department video, "Prevention of MRSA in the Athletic Setting"

<http://www.charmeck.org/Departments/Health+Department/Top+News/MRSA.htm>