# Methicillin-resistant Staphylococcus aureus: Occupational exposure, dynamics of carriage and associated disease in livestock farmers and their household members.

Published: 02-09-2009 Last updated: 04-05-2024

Primary objective: To determine the dynamics of MRSA carriage in persons working on or living at pig and veal farms. Secondary objectives: To determine the amount of disease associated with carriage of MRSA-CC398. To determine the role of exposure to...

**Ethical review** Approved WMO

**Status** Recruitment stopped

**Health condition type** Bacterial infectious disorders **Study type** Observational non invasive

# **Summary**

#### ID

NL-OMON33440

Source

ToetsingOnline

**Brief title** 

POM-study

#### **Condition**

Bacterial infectious disorders

### **Synonym**

hospital bacteria, MRSA

### Research involving

Human

Sponsors and support

**Primary sponsor:** Sint Elisabeth Ziekenhuis

Source(s) of monetary or material Support: ZonMw

Intervention

**Keyword:** carrier state, livestock, MRSA, occupational risk

**Outcome measures** 

**Primary outcome** 

The primary outcome is the prevalence of persistent MRSA carriage in primary

versus secondary exposed persons. A secondary case is defined as a household

member that carries MRSA-CC398 on a farm were MRSA was found during the study

period. Persistent carriage is defined as all samplings being positive for

MRSA, intermittent carriage is defined as 1 to 5 out of 6 samples positive. If

none of the samples return MRSA it is referred to as non-carriage. Adjustment

for factors that may influence persistent carriage, e.g. carriage of

methicillin susceptible S. aureus (MSSA), throat carriage, the amount of MRSA

present in the nose or throat and the presence of MRSA in wounds or skin

diseases will be done. Furthermore, the association between the number of

positive samples during the initial 3 swabs and the carriage status at 4, 8 and

12 months is determined. This is done for both MSSA and MRSA.

**Secondary outcome** 

To determine the amount of disease associated with carriage of MRSA-CC398 the

occurrence of medical events will be recorded. Not only infections caused by

MRSA are included in this follow-up but also visits to the general

practitionar, use of antibiotics, hospital admissions etc. Adjustment for

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factors that may affect the occurrence of disease will be done using regression analysis. Lastly the exposure to dust on MRSA positive farms will be studied, using information from questionnaires, personal dust samplers and environmental samples from house and stable.

# **Study description**

## **Background summary**

Traditionally, methicillin-resistant Staphylococcus aureus (MRSA) has been considered a hospital related pathogen. More recently, MRSA has emerged in the community as well. Recently a specific clone, MRSA-CC398, has been discovered, which is coming from an extensive animal reservoir. Initial surveys have shown a high prevalence of carriage in livestock farmers (up to 30%) and lower carriage rates in people living on farms but with limited direct contact with the animals (up to 4%). MRSA has also been recovered from more than 10% of retail pork and 16% of veal calf meat samples in The Netherlands. However, the exact consequences of this reservoir to public health are at present unknown, as no research has been done so far to reveal the dynamics of carriage and association with disease of MRSA-CC398 in livestock farmers and their household members.

## **Study objective**

Primary objective: To determine the dynamics of MRSA carriage in persons working on or living at pig and veal farms.

Secondary objectives: To determine the amount of disease associated with carriage of MRSA-CC398. To determine the role of exposure to dust in the environment on the occurrence of disease.

### Study design

In this study participants experience nasal and throat swabs, questionnaires and environmental samples. Part of the nasal swabs, questionnaires and environmental samples is taken by a trained representative of the study; another part is taken by the participant himself. Throat swabs will only be taken by trained representatives. In addition, blood samples will be taken on a volunatary base, in order to determine genetical features of MRSA-carriage. In some farms environmental samples will be validated by Anderson samplers. Moreover, direct exposed persons are equipped with a portable pump, in order to measure the dust and bacterial load during high risk tasks in the farm.

This study involves 3 sampling moments in the first week, and after this 1 sampling moment every 4 months ending 1 year after start of the study, adding up to a total of 6 sampling moments. At the beginning as well as at the end of the study, farms will be visited by a representative. The samples at moments in between will be taken by the participants themselves. For an overview, see the time schedule in the study protocol.

## Study burden and risks

Participation in the study does not take much time (30-60 minutes per sampling moment) and there are no invasive procedures. Altogether, 1 throat and 6 nasal swab samples will be taken from all subjects, these will be tested for presence of MRSA. Taking nose and throat swabs should not be considered to be much discomfort to the subjects. Blood samples can be taken on a voluntary base, and will not give much discomfort as well.

Furthermore, during the one year follow-up period questionnaires are taken at 6 moments. At the beginning and at the end of the study two extensive questionnaires will be taken. There will be no physical or psychological discomfort, no site visits and no physical examinations or other tests associated with participation. Therefore, participation in the study will not involve any substantial risk for the included subjects and the investigators will not interfere with treatment.

## **Contacts**

#### **Public**

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## **Trial sites**

## **Listed location countries**

Netherlands

# **Eligibility criteria**

#### Age

Adolescents (12-15 years) Adolescents (16-17 years) Adults (18-64 years) Children (2-11 years) Elderly (65 years and older)

## **Inclusion criteria**

Individuals of any age are eligible and should be:

- 1 Working with pigs or veal calves on a farm (primary exposed) or
- 2 Living on a pig or veal farm and not working with the animals (secondary exposed)

## **Exclusion criteria**

- Treatment for colonization of MRSA in the last 3 months of any potential participant (farm will be excluded)
- Being colonized with other types of MRSA than CC398

# Study design

## **Design**

Study type: Observational non invasive

Intervention model: Other

Allocation: Non-randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Basic science

## Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 20-01-2010

Enrollment: 200

Type: Actual

## Medical products/devices used

Registration: No

# **Ethics review**

Approved WMO

Date: 02-09-2009

Application type: First submission

Review commission: METC Brabant (Tilburg)

# **Study registrations**

# Followed up by the following (possibly more current) registration

No registrations found.

# Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register ID

CCMO NL28121.008.09