



C. difficile infection

Treatment

By Mayo Clinic Staff

The first step in treating *C. difficile* is to stop taking the antibiotic that triggered the infection, when possible. Depending on the severity of your infection, treatment may include:

- **Antibiotics.** Ironically, the standard treatment for *C. difficile* is another antibiotic. These antibiotics keep *C. difficile* from growing, which in turn treats diarrhea and other complications.

For mild to moderate infection, doctors usually prescribe metronidazole (Flagyl), taken by mouth. Metronidazole is not approved by the FDA for *C. difficile* infection, but has been shown to be effective in mild to moderate infection. Side effects of metronidazole include nausea and a bitter taste in your mouth.

For more severe and recurrent cases, vancomycin (Vancocin), also taken by mouth, may be prescribed.

Another oral antibiotic, fidaxomicin (Dificid), has been approved to treat *C. difficile*. In one study, the recurrence rate of *C. difficile* in people who took fidaxomicin was lower than among those who took vancomycin. However, fidaxomicin costs considerably more than metronidazole and vancomycin. Common side effects of vancomycin and fidaxomicin include abdominal pain and nausea.

- **Surgery.** For people with severe pain, organ failure, toxic megacolon or inflammation of the lining of the abdominal wall, surgery to remove the diseased portion of the colon may be the only option.

Recurrent infection

Up to 20 percent of people with *C. difficile* get sick again, either because the initial infection never went away or because they're reinfected with a different strain of the bacteria. But after two or more recurrences, rates of further recurrence increase up to 65 percent.

Your risk of recurrence is higher if you:

- Are older than 65
- Are taking other antibiotics for a different condition while being treated with antibiotics for *C.*

difficile infection

- Have a severe underlying medical disorder, such as chronic kidney failure, inflammatory bowel disease or chronic liver disease

Treatment for recurrent disease may include:

- **Antibiotics.** Antibiotic therapy for recurrence may involve one or more courses of a medication (typically vancomycin), a gradually tapered dose of medication or an antibiotic given once every few days, a method known as a pulsed regimen. The effectiveness of antibiotic therapy declines with each subsequent recurrence.
- **Fecal microbiota transplant (FMT).** Also known as a stool transplant, FMT is emerging as an alternative strategy for treating recurrent *C. difficile* infections. Though not yet approved by the FDA, clinical studies of FMT are currently underway.

FMT restores healthy intestinal bacteria by placing another person's (donor's) stool in your colon, using a colonoscope or nasogastric tube. Donors are screened for medical conditions, their blood is tested for infections, and stools are carefully screened for parasites, viruses and other infectious bacteria before being used for FMT.

Research has shown FMT has a success rate higher than 90 percent for treating *C. difficile* infections.

- **Probiotics.** Probiotics are organisms, such as bacteria and yeast, which help restore a healthy balance to the intestinal tract. A yeast called *Saccharomyces boulardii*, in conjunction with antibiotics, might help prevent further recurrent *C. difficile* infections.

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