

In hospitals, daily antiseptic bath may prevent dangerous infections

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Simple swab-based cleansing cut rates of some drug-resistant bacteria by 23 percent, study found.

(HealthDay)—A daily swabbing with a simple antiseptic greatly decreases the number of life-threatening bloodstream infections and drug-resistant bacteria lurking among patients in acute-care hospital units, a new study suggests.

Researchers found that bathing patients with washcloths soaked with chlorhexidine—a cheap, broad-spectrum antiseptic—lowered the rate of hospital-acquired bloodstream infections by 28 percent.

Highly feared multidrug-resistant organisms such as MRSA (methicillin-resistant staphylococcus aureus) and VRE ([vancomycin](#)-resistant enterococcus) were reduced by 23 percent.

"We're talking about an intervention that's very simple to implement and

minimal in cost," said study author Dr. Edward Wong, chief of infectious disease at Hunter Holmes McGuire Veterans Affairs Medical Center in Richmond, Va. "This can be laid on top of all the other things [experts recommend] to decrease the spread of these organisms."

The study is published in the Feb. 7 issue of the [New England Journal of Medicine](#).

About 5 percent of hospitalized patients acquire healthcare-associated infections, often from bacteria entering the bloodstream through surgical incisions or catheters, according to the U.S. Centers for Disease Control and Prevention (CDC). The per-patient cost of treating such infections is enormous—approximately \$40,000, Wong said.

Wong and his colleagues analyzed more than 7,700 patients in nine intensive-care and bone-marrow-transplantation units in six hospitals. Health providers were randomly assigned to bathe patients with either no-rinse chlorhexidine-soaked washcloths or non-antimicrobial washcloths for six months, then alternate with the other product for an additional six months. Chlorhexidine wipes, when sold in bulk, cost less than 20 cents apiece on Internet sites.

The dramatically lowered rates of [bloodstream infections](#) and MRSA and VRE acquisition—which can mean a patient is either a carrier or infected with the bacteria—didn't surprise Wong, whose previous research yielded similar results.

"At least based on preliminary studies we've done, we knew we'd have some benefit but we wanted to make sure we could generalize," he said. Chlorhexidine wipes "are clearly going to cost much less than the cost of antibiotics or the cost of health care."

Dr. Philip Tierno, director of clinical microbiology and immunology at

NYU Langone Medical Center in New York City, said his institution has been using chlorhexidine for years on [patients](#) about to have surgery.

"It's very good because it has residual effectiveness on the skin for a day or two," he said. "So when the surgeon cuts through flesh, it's less likely to impregnate the skin with organisms."

"If you get a very serious infection ... it may lead to significant problems," Tierno added. "This has a very good benefit and it's worthwhile to pursue."

More information: There's more on healthcare-associated infections at the [U.S. Centers for Disease Control and Prevention](#).

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