

Modifiable factors ID'd for reducing surgical site infections

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Specific modifiable preoperative, intraoperative, and postoperative factors can be optimized to reduce the risk of surgical site infections for patients undergoing elective orthopedic surgery, according to research published in the September issue of *The Spine Journal*.

(HealthDay)—Specific modifiable preoperative, intraoperative, and postoperative factors can be optimized to reduce the risk of surgical site infections (SSIs) for patients undergoing elective orthopedic surgery, according to research published in the September issue of *The Spine Journal*.

Jason W. Savage, M.D., of the Northwestern University Feinberg School of Medicine in Chicago, and Paul A. Anderson, M.D., of the University of Wisconsin in Madison, performed a systematic review of the literature to identify modifiable factors that may help to reduce the risk of SSIs.

The researchers note that health care providers may be able to lower the risk of patients undergoing an elective [orthopedic surgery](#) developing an SSI by implementing prescreening programs and using mupirocin ointment and chlorhexidine soap/shower to lower the risk of nosocomial *Staphylococcus aureus* infections. Other evidence from the literature suggests that betadine irrigation or using vancomycin powder in the wound before closure may also help to reduce the risk of SSI.

"The main focus moving forward should be on optimizing individual patients medically before surgery, as evidence has shown that diabetes, obesity, smoking, and malnutrition can all considerably increase the risk of postoperative infection," the authors write. "Furthermore, recent data suggest that an institutionalized methicillin-sensitive/methicillin-resistant *Staphylococcus aureus* detection and decolonization program can significantly lower SSIs, which is extremely promising and warrants further investigation."

Several authors disclosed financial ties to medical and surgical technology companies.

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