

New guidance released for preventing hospital-acquired pneumonia

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Medical ventilator, Cardiac care unit, State of Palestine 2019. Credit: [أمين](#) /Wikimedia Commons, [CC BY-SA 4.0](#)

In the second in series of updates on guidance for infection control in acute-care hospitals, five medical organizations are recommending best practices for preventing hospital-associated pneumonia. Pneumonia is the most common and deadly healthcare-associated infection.

"Strategies to Prevent Ventilator-Associated Pneumonia, Ventilator-Associated Events, and Nonventilator Hospital-Acquired Pneumonia in Acute-Care Hospitals: 2022 Update" is one in a series of guidelines, known collectively as the Compendium, scheduled for publication this year. The Compendium is a multiyear, highly collaborative guidance-writing effort by more than 100 experts from around the world.

"Preventing hospital-acquired [pneumonia](#) is complicated because the diagnosis is often subjective and non-specific," said Dr. Michael Klompas, first author of the guidance. "This complicates the interpretation of the prevention literature. The compendium helps distill the highest yield practices to prevent ventilator-associated events in ventilated patients and pneumonia in both ventilated and non-ventilated patients."

Essential practices that evidence shows to prevent ventilator-associated pneumonia include:

- Avoiding intubation
- Minimizing sedation
- Maintaining and improving physical conditioning
- Elevating the head of the bed
- Providing oral care with toothbrushing

- Providing early enteral rather than parenteral nutrition
- Maintaining ventilator circuits

This document includes a section on how to prevent non-ventilator hospital-acquired pneumonia, emphasizing the role of oral care, managing dysphagia, and using multimodal approaches to prevent [viral infections](#).

This document, published in *Infection Control and Hospital Epidemiology*, updates the 2014 "Strategies to Prevent Ventilator-Associated Pneumonia in Acute-Care Hospitals." The compendium, first published in 2008, is sponsored by the Society for Healthcare Epidemiology (SHEA). It is the product of a collaborative effort led by SHEA, the Infectious Diseases Society of America, the Association for Professionals in Infection Control and Epidemiology, the American Hospital Association, and The Joint Commission, with major contributions from representatives of a number of organizations and societies with content expertise.

Upcoming Compendium updates will include strategies to prevent catheter-associated [urinary tract infections](#), Clostridium difficile infections, methicillin-resistant Staphylococcus aureus infections, and surgical site infections. Hand hygiene also has a dedicated article. Each Compendium article contains [infection](#) prevention strategies, performance measures, and example implementation approaches. Compendium recommendations are derived from a synthesis of systematic literature review and evaluation of the evidence, practical and implementation-based considerations, and expert consensus.

More information: Michael Klompas et al, Strategies to prevent ventilator-associated pneumonia, ventilator-associated events, and nonventilator hospital-acquired pneumonia in acute-care hospitals: 2022 Update, *Infection Control & Hospital Epidemiology* (2022). [DOI:](#)

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