

The Clean Prairies

NEWS FROM THE ALBERTA, SASKATCHEWAN & MANITOBA CHAPTER OF CSSA



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INFECTION CONTROL

Importance of the Environment in MRSA Acquisitions: *The Case for Hospital Cleaning*

By **STEPHANIE J. DANCER**,
Director, Department of Microbiology,
Southern General Hospital, Glasgow
(Editor, Journal of Hospital Infection)

There is much concern over the state of hygiene in hospitals. The general public seems to associate visibly dirty wards with increasing rates of methicillin-resistant *Staphylococcus aureus* (MRSA) acquisition, but historically there has been little evidence that the environment is important in endemic hospital-acquired infection. This premise has been challenged since the increase in MRSA in hospitals in the past decade. Because a clean environment is usually taken for granted, it is not surprising that there is little evidence to show that cleanliness could be an important control factor in the spread of MRSA. Furthermore, the measurement of how clean a hospital is, other than

by visual assessment which is both subjective and inaccurate, is difficult because such an assessment does not necessarily correlate with microbiological risk.

The issue of hospital-acquired infections is compounded by the current politically generated drive to reduce waiting lists. Hospitals are crowded with sick people in close proximity to one another, even though years of work in infection control have shown us that patients pass their microorganisms to those nearby. This was first recognized by Florence Nightingale in the 19th Century, at least 10 years before the advent of bacteriology. She concluded that the use of small, separate rooms could have prevented the high rate of mortality in maternity cases after an outbreak of erysipelas at a midwife training school. However, lack of isolation



facilities and continued pressure on the availability of beds provide a serious challenge to standard principles of infection control.

A recent study has confirmed an association between MRSA bacteraemia rates, bed occupancies and even bed turnover times.

However, not only do governmental faculties not understand the link between visible dirt and the presence of pathogenic microorganisms, they also do not support the premise that crowded hospitals facilitate the spread of infection.

Only a few studies provide evidence that cleaning reduces the risk of acquiring MRSA in health-care institutions. There is another way, however, of justifying cleaning as a useful control strategy for MRSA. We already have evidence

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