Treating the Hospital
Following simple hygiene can prevent infections, deaths

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Vienna physician Ignaz Semmelweis made an observation 160 years ago triggering a change in the way medical personnel dealt with patients: He recommended that doctors simply wash their hands. Many physicians of the day would conduct an autopsy on a decaying corpse then proceed to deliver a baby - without bothering to scrub.

Now, Betsy McCaughey, New York's former lieutenant governor, is reinvigorating Semmelweis' message, emphasizing that people do not have to die because they've been admitted to a hospital. U.S. hospitals, she said, continue to record hundreds of thousands of hospital-acquired infections annually - and at great human and financial cost. Medical personnel, she underscored, still are not following simple steps of hygiene.

"The United States has one of the best medical systems in the world," McCaughey said during a seminar she presented last week in Melville. "But we're practicing Third World hygiene at the same time we are practicing First World medicine."

Dr. Janet Stout of the University of Pittsburgh, an expert in Legionella, the bacteria that cause Legionnaire's disease, said at the seminar that hospitals must put surveillance strategies in place to prevent bacteria from colonizing in the first place. Hospital plumbing is one site. In addition to Legionnaire's Stout described several other pneumonia-causing pathogens, such as Pseudomonas aeruginosa, that also routinely inhabit hospitals and colonize plumbing.

Hospital instruments, McCaughey added, are a frequent source of infections, pointing to blood pressure cuffs and stethoscopes that are not sanitized between patients. "Hospitals are losing their shirts on these infections. They cost $30 billion a year," said McCaughey, who also estimates that 1 in every 20 patients admitted to a U.S. hospital contracts an infection.

Her key target is methicillin-resistant staphylococcus aureus - MRSA, a bug whose very origin is in hospitals. MRSA is noteworthy because it gets its name from its ability to repel the antibiotic methicillin. Recently, another form of MRSA has been developing in communities. McCaughey said if patients were tested for MRSA before hospital admission fewer cases would occur.

The Centers for Disease Control and Prevention estimates 2 million people a year acquire a hospital infection and that about 20,000 die. But McCaughey estimates a higher number of deaths - about 100,000 a year - because some infections do not manifest until patients are released and they die at home or in other facilities.

In New York, health officials estimate about 100 hospital-acquired infections annually, but the figure probably reflects only a fraction of cases. The state will begin a "report card" system in 2008 to reveal
hospitals with the best and worst records. Pennsylvania, the first state to require reporting, announced in November that 19,000 infections occurred in 2005, thousands more than were known before mandatory reporting.

McCaughey honed her skills as a medical policy expert at think tanks where she has written prolifically about health care issues. As lieutenant governor from 1994-98, she put an emphasis on health care legislation. In 2002, she founded the Committee to Reduce Infection Deaths, called RID.

Stephen Signorile of Port Washington, who volunteers at RID, said he wishes he knew in 1999 what he knows now. His wife, Helene, was admitted to a hospital to have a small brain tumor removed, but acquired a brain infection in the facility that left her partially paralyzed. He identified the institution only as a major cancer center in Manhattan.

"She's one of the lucky ones who survived, but her life has been ruined," Signorile said.

**Tips for patients**

The Committee to Reduce Infection Deaths has developed a 15-point primer on ways patients can protect themselves from hospital infections. Here are a few steps.

Always demand that health care providers wash their hands before treating you.

If you are to have surgery, ask your surgeon to limit the number of personnel in the operating room.

Avoid a urinary tract catheter, if at all possible. Ask for diapers or a bedpan.

Choose a surgeon with a low infection rate. If your surgeon won't reveal his or her rate, find another surgeon.

One week before surgery, shower frequently with chlorhexidine soap. You can purchase it over-the-counter under the brand name, Hebiclens.

Before a health care provider uses a stethoscope, ask that the diaphragm, the device placed on your chest, be sanitized with alcohol.

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