

Embargoed for Release until 10 a.m. EST Wednesday, Oct. 8, 2008

Contact: Gina Czark and Ashley Mattys
Public Communications, Inc. (PCI)
312.558.1770

gczark@pcipr.com and amattys@pcipr.com

NATION'S TOP HEALTHCARE ORGANIZATIONS ANNOUNCE STRATEGIES TO PREVENT DEADLY HEALTHCARE-ASSOCIATED INFECTIONS

Strategies emphasize practical implementation in acute healthcare settings

AT A GLANCE

- For the first time, five leading healthcare stakeholders (SHEA, IDSA, AHA, APIC and The Joint Commission) have worked together to develop strategies to prevent six of the most important healthcare-associated infections (HAIs), including MRSA and *C. diff* infections.
- HAIs are a critical public health issue, affecting nearly 2 million Americans annually, with 90,000 deaths and up to \$6.5 billion in extra costs, according to the CDC.

WASHINGTON, D.C. (October 8, 2008) — For the

first time, five leading healthcare organizations have come together to publish practical, science-based strategies to help prevent the six most important healthcare-associated infections (HAIs).

Preventing HAIs is one of the nation's highest priority public health and patient safety goals. The Centers for Disease Control and Prevention (CDC) estimate that 2 million Americans contract an infection while receiving medical treatment and over 90,000 Americans will die as a result of complications from an infection each year. Hospital infections cost Americans between \$4.5 billion and \$6.5 billion in extra healthcare costs annually.

“People should expect healthcare that is safe and free from additional complications,” said P.J. Brennan, M.D., head of the federal Healthcare Infection Control Practices Advisory Committee (HICPAC) and President of the Society for Healthcare Epidemiology of America (SHEA). “This effort will benefit healthcare providers, patients and their families, and just about everyone who walks in the hospital door because the strategies announced today identify what hospitals should be doing based on the latest scientific evidence and also provide performance measures to ensure accountability.

The *Compendium of Strategies to Prevent Healthcare-Associated Infections in Acute Care Hospitals* was produced by SHEA and the Infectious Diseases Society of America (IDSA), in partnership with the American Hospital Association (AHA); the Association for Professionals in Infection Control and Epidemiology, Inc. (APIC); and The Joint Commission, which accredits

and certifies more than 15,000 healthcare organizations and programs in the United States. Infection control experts at SHEA and IDSA will assume responsibility for updating these strategies as science evolves.

“The goal of all of us as healthcare providers is to offer the best and safest patient care possible. Not all HAIs are preventable, but it is imperative that we implement practices that we know are effective to prevent as many of these infections as possible,” said SHEA spokesperson Deborah S. Yokoe, M.D., lead author of the strategies. “We know that relying on the best science available will help get us to that goal.”

With the support or endorsement of an additional 29 healthcare organizations, the *Compendium* is expected to be a good starting point for addressing this critical public health issue before it worsens.

“In developing these strategies, we looked at all existing HAI guidelines and literature to create recommendations that are understandable, easy-to-use and stress accountability,” said David Classen, M.D., IDSA spokesperson and co-author of the strategies.

Six of the most important preventable HAIs with the greatest impact on morbidity and mortality were identified by the HAI Allied Task Force comprising the five collaborating partners. Recommendations are prioritized into two categories:

- 1) Minimum basic practices that should be adopted by all acute care hospitals
- 2) Special approaches for use in locations and/or populations within the hospitals when infections are not controlled using basic practices

Two sections focus on preventing spread of specific organisms:

- **Methicillin-resistant *Staphylococcus aureus* (MRSA)**
Staphylococcus aureus, also known as “staph,” is a very common germ that many people have on their skin or in their nose. This germ can sometimes cause serious infections of the skin, blood, lungs or open wound. MRSA infections are harder to treat because fewer antibiotics are effective once the staph bacteria become resistant to methicillin (a common antibiotic).
- ***Clostridium difficile* Infection (CDI)**
Clostridium difficile, also known as *C. diff*, is a type of bacteria that can cause diarrhea and in some cases, serious intestinal infections. *C. diff* can increase hospital stay as well as increase costs, morbidity and mortality in adult patients.

Four sections focus on device-and procedure-associated HAIs:

- **Central line-associated bloodstream infection (CLABSI)**
Patients, especially those requiring intensive care, often need central lines (also called central venous catheters) for fluids or medications. A CLABSI occurs when microorganisms travel down the catheter and enter the blood. This can lead to serious illness and longer hospitalization.
- **Ventilator-associated pneumonia (VAP)**
VAP occurs in pediatric and adult patients who require a machine to help them breathe. An estimated 25 percent of patients on a ventilator will develop VAP.
- **Catheter-associated urinary tract infection (CAUTI)**
Urinary catheters are used for patients unable to urinate on their own. Urinary tract infection is the most common HAI with about 80 percent of urinary tract infections acquired in the hospital attributable to long-term use of urinary catheters.
- **Surgical site infection (SSI)**
SSI occurs in 2 to 5 percent of patients undergoing inpatient surgery in the United States with an estimated 500,000 occurring annually. Overall, SSIs are associated with about \$7 billion to \$10 billion annually in healthcare expenditures in the U.S.

“Adhering to evidence-based interventions to help eliminate preventable infections will be more important than ever before,” said APIC’s 2008 President Janet E. Frain. “Clinical and administrative leaders need to continue their support in making infection prevention a key patient safety initiative within their organization. Patient safety is everyone’s job.”

With patient concerns for HAIs growing, the five partnering organizations decided the time was right to review and synthesize current guidelines and develop practical strategies that could be readily implemented by healthcare professionals. The urgency is also heightened for acute care facilities to work toward eliminating HAIs. Beginning Oct. 1, 2008, the Centers for Medicare and Medicaid Services (CMS) will no longer reimburse hospitals for costs related to treating certain HAIs.

“Relevant, evidence-based guidelines must serve as the basis for infection prevention implementation strategies,” said Robert A. Wise, M.D., vice president, Standards and Survey Methods, The Joint Commission. “The Compendium meets a great need for clear, user-friendly language, and was an important component in the development of The Joint Commission’s 2009 National Patient Safety Goals on HAIs, which include multi-drug resistant organisms, central line-associated bloodstream infections, and surgical site infections.”

“Hospitals welcome these strategies as clearly identifiable things that can be done to improve and measure their quality efforts,” said Rich Umbdenstock, president and CEO of the AHA. “Working closely with this group has given us the opportunity to help ensure that this information can be put to work quickly on the front lines to make care better and safer for our patients.”

“*A Compendium of Strategies to Prevent Healthcare-Associated Infections in Acute Care Hospitals*” can be viewed at www.journals.uchicago.edu/toc/iche/2008/29/s1 and will be published subsequently as a supplement to SHEA’s journal *Infection Control and Healthcare Epidemiology*.

Additional information about the compendium can be found by visiting our online media kit at www.preventingHAIs.com.

Press conference can be viewed live at www.visualwebcaster.com/preventingHAIs-100808.

About SHEA and IDSA

The Society for Healthcare Epidemiology of America (SHEA) was organized in 1980 to foster the development and application of the science of healthcare epidemiology, which is broadly defined as activities designed to study and/or improve patient care outcomes. Healthcare epidemiology includes a variety of disciplines and activities including epidemiologic and laboratory investigation, surveillance, risk reduction, policy, education and cost-benefit assessment. The Society, which represents physicians, scientists and infection prevention professionals, is based in Arlington, Va. For more information, visit www.shea-online.org.

The Infectious Diseases Society of America (IDSA) is a professional organization of physicians, scientists, and other health care professionals dedicated to promoting human health through excellence in infectious diseases research, education, prevention, and patient care. The Society, which has more than 8,000 members, is based in Arlington, Va. For more information, visit www.idsociety.org.

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Editor’s Note: A full list of the 29 healthcare organizations that endorse or support this compendium of HAI-prevention strategies follows:

Endorsing Organizations:

AONE
Association for Respiratory Care (AARC)
Infusion Nurses Society (INS)
Pediatric Infectious Disease Society (PIDS)
Society for Critical Care Medicine (SCCM)
Society for Hospital Medicine (SHM)
Surgical Infection Society (SIS)

Supporting Organizations:

AARP
Academy Health
Agency for Healthcare Research and Quality (AHRQ)
American Academy of Emergency Physicians
American Association of Critical Care Nurses
American College of Physicians
American College of Surgeons
American Medical Association
Cardinal Health
Centers for Disease Control and Prevention (CDC)
Council of State and Territorial Epidemiologists (CSTE)
HCA Health System
Healthcare Infection Control Practices Advisory Committee (HICPAC)
Institute for Healthcare Improvement (IHI)
International Society for Microbial Resistance (ISMR)
National Foundation for Infectious Diseases (NFID)
National Quality Forum (NQF)
Premier, Inc.
Society of Infectious Diseases Pharmacists (SIDP)
Trust for America's Health (TFAH)
United Healthcare
WellPoint Health Network