



## Poor hospital hygiene enough to make you ill

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BY BETSY MCCAUGHEY

If you think you may have to go into the hospital soon, keep reading. A new report (Sept. 15) highlights one of the gravest dangers you'll face: the risk of getting a hospital infection that antibiotics cannot cure. The report, in the medical journal *Clinical Infectious Diseases*, focuses on a large and deadly group of infections, including acinetobacter. The fact that so many of these infections are becoming untreatable is a "serious public health concern." You've probably never heard of these "superbugs," even if someone in your own family has suffered from them, because most hospitals say as little as possible when there's an infection problem.

How big is your risk? In the United States, one out of every 20 hospital patients gets an infection, which kills as many people in our country as AIDS, breast cancer and auto accidents combined -- an estimated 103,000 deaths each year. Amazingly, these infections are almost all preventable. They spread rapidly through hospitals because of poor hygiene: unclean hands, lax procedures and contaminated equipment. Research shows that doctors fail to clean their hands before treating a patient 52 percent of the time. Stethoscopes, blood pressure monitors and other equipment are often used on one patient after another without being cleaned, and even doctors' lab coats and nurses' uniforms transport germs from bedside to bedside.

Hospitals are far dirtier places now than they were 50 years ago, before the excessive use of antibiotics replaced careful attention to cleanliness. Overuse of antibiotics is also to blame for the fact that many infections no longer can be cured with commonly used drugs. Three decades ago, the first patients came down with methicillin-resistant staphylococcus aureus, or MRSA. In 1972, only 2 percent of staph infections were MRSA, but now that figure has soared to more than 60 percent.

A few hospitals are proving that these drug-resistant infections can be prevented. The University of Virginia Hospital eradicated MRSA. The University of Pittsburgh Medical Center-Presbyterian Hospital slashed MRSA in the medical intensive care units by 90 percent. How did they do it? Through rigorous hand hygiene, meticulous cleaning of equipment in between patient use, testing incoming hospital patients to identify those carrying dangerous bacteria, and strictly isolating them to prevent transmission to other patients.

Recent events show just how dangerous the situation could become. Hundreds of hurricane victims who waded through sewage-infested floodwaters in New Orleans and were exposed to high levels of dangerous bacteria were then brought to hospitals in Alabama and Texas for treatment. Though no outbreaks of infectious diseases have been reported, these hospitals "should exercise a higher level of precaution" to prevent the spread of bacteria from flood victims to other patients, warns Nobel Laureate Dr. Joshua Lederberg, a member of the Committee to Reduce Infection Deaths. "It's more important now to do what should be done routinely," he explains.

Not enough was done to prevent the spread of acinetobacter at the National Naval Medical Center in Bethesda, Md., where 40 soldiers were brought for treatment after contracting infections in Iraq. The germ raced through the hospital, infecting other patients who had not come in with it. Imagine if the same hospital had to deal with bioterrorism. That's why shoddy infection control is also poor homeland security.

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