



Fighting Infections

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New York used to lead the nation in health care. In many respects, it still does. But not in one critical area: fighting hospital infections. Instead, New York trails behind Illinois, Massachusetts, Maryland and other states, as well as France, Denmark, Finland and the Netherlands.

How so? All of the other states and foreign countries have taken steps to reduce the number of staph infections in hospitals. But New York lags behind.

The bacteria that can cause these infections are carried on the skin, where they are harmless. But once they get under the skin -- for example, through a catheter, an IV or incision -- they can cause serious infections that are often resistant to common antibiotics. Indeed, hospital infections have been linked to the deaths of more than 100,000 patients every year, or five times more than those who die of AIDS.

And all because some simple, inexpensive procedures weren't taken.

Betsy McCaughey, who was George Pataki's first lieutenant governor, is rightly raising the alarm over these statistics, and urging the state Health Department to adopt guidelines for hospitals. The Committee to Reduce Infection Deaths, which Ms. McCaughey chairs, is providing information that should be helpful -- and in some cases, eye-opening -- for hospital administrators and patients alike.

The surest way to reduce the rate of staph infections, according to the committee, is to test everyone who is admitted to the hospital. That would involve a simple nasal or skin swab. Without a mandated test, doctors and nurses who come in contact with an infected patient often unknowingly carry the bacteria throughout the hospital, exposing other patients to infections through the use of blood pressure cuffs, bed rails, wheelchairs, stethoscopes and other equipment.

Regrettably, there are no federal guidelines for screening for staph bacteria, and the Centers for Disease Control claim more research is needed before promulgating them. But the experience at some major hospitals -- Boston's New England Baptist; Baltimore's Johns Hopkins; Evanston Northwestern in Illinois -- shows that when precautions are taken, there's a significant decline in infections. Similar results have been recorded in other countries where precautions are mandatory.

Ms. McCaughey estimates the cost of preventive measures at about \$35,000 a year for hospitals, while the savings, as measured in the costs of treating infections, would amount to \$800,000 a year. The math is compelling. It adds up to an urgent need for New York to mandate testing.