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Consider Scrubs Risk in Context

If we were to follow Ms. McCaughey's logic, then we need to include all visitors who visit their loved ones each day in the hospital, since they too are a point of contamination and transfer. However, she failed to include this in her paradigm. In the end the best defense in

minimizing hospital-borne infections is for basic simple procedures such as aggressive hand washing and the return to basic nursing practices such as "clean to clean and dirty to dirty." It is also important to remind your readers that generally healthy people are not at risk for C. diff, which makes Ms. McCaughey's restaurant example an attempt to unduly frighten the public at large.

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Hospital Scrubs Are a Germy, Deadly Mess

By Betsy McCaughey

You see them everywhere—nurses, doctors and medical technicians in scrubs or lab coats. They shop in them, take buses and trains in them, go to restaurants in them, and wear them home. What you can't see on these garments are the bacteria that could kill you.

Dirty scrubs spread bacteria to patients in the hospital and allow hospital superbugs to escape into public places such as restaurants. Some hospitals now prohibit wearing scrubs outside the building, partly in response to the rapid increase in an infection called "C. diff." A national hospital survey released last November warns that *Clostridium difficile* (C. diff) infections are sickening nearly half a million people a year in the U.S., more than six times previous estimates.

The problem is that some medical personnel wear the same unlaundered uniforms to work day after day. They start their shift already carrying germs such as C. diff, drug-resistant enterococcus or staphylococcus. Doctors' lab coats are probably the dirtiest. At the University of Maryland, 65% of medical personnel confess they change their lab coat less than once a week, though they know

it's contaminated. Fifteen percent admit they change it less than once a month. Superbugs such as staph can live on these polyester coats for up to 56 days.

Do unclean uniforms endanger patients? Absolutely. Health-care workers habitually touch their own uniforms. Studies confirm that the more bacteria found on surfaces touched often by doctors and nurses, the higher the risk that these bacteria will be carried to the patient and cause infection.

Bacteria on doctor uniforms can kill you.

Until about 20 years ago, nearly all hospitals laundered scrubs for their staff. A few hospitals are returning to that policy. St. Mary's Health Center in St. Louis, Mo., reduced infections after cesarean births by more than 50% by giving all caregivers hospital-laundered scrubs, as well as requiring them to wear two layers of gloves. Monroe Hospital in Bloomington, Ind., which has a near-zero rate of hospital-acquired infections, provides laundered scrubs for all staff and prohibits them from wearing scrubs outside the building.

Stamford Hospital in Connecticut recently banned wearing scrubs outside the hospital.

Across the pond, a British study found that one-third of medical personnel did not launder their uniforms before coming to work. One British surgeon who specializes in hip and knee replacements reduced post-operative infections by two-thirds at her hospital by protecting patients from contaminated uniforms. Before approaching any patient's bed, nurses put on disposable, clear plastic aprons that were pulled off rolls like dry cleaning bags. Each one costs a nickel.

In response to this evidence and public outrage over infections, the cash-strapped British National Health Service is providing nurses with hospital-laundered "smart scrubs." The smart design includes short sleeves, because long sleeves spread germs from patient to patient.

The new British policy will protect patients and prevent superbugs from being carried outside hospitals. In one study, more than 20% of nurses' uniforms had C. diff on them at the end of a shift. The germ can cause extreme diarrhea, dehydration, inflammation of the colon, and even death.

In a hospital, C. diff contaminates virtually every surface. It

spreads when traces of an infected person's feces get in another person's mouth. Patients who touch objects in their room and then eat without washing their hands unknowingly swallow the germ. Many otherwise healthy patients who go into the hospital for elective surgery, such as hip replacement, have contracted C. diff and died.

Outside the hospital, C. diff is also difficult to control. It isn't killed by laundry detergents or most cleaners. Researchers at Case Western Reserve and the Cleveland Veterans Administration Medical Center found that even after routine cleaning, 78% of surfaces still had C. diff. Only scrubbing with bleach removed it. That's not the kind of cleaning restaurants are prepared to do after serving hospital workers.

Imagine sliding into a restaurant booth after a nurse has left the germ on the table or seat. You could easily pick it up on your hands and then swallow it with your sandwich. Hospitals should provide workers with clean uniforms and prohibit wearing them in public.

Ms. McCaughey, former lieutenant governor of New York state, is a fellow at the Hudson Institute and chair of the Committee to Reduce Infection Deaths.