HEALTHCARE ASSOCIATED INFECTIONS

BACTERIA

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1

Reference

- "Guidelines for Environmental Infection Control in Health-Care Facilities 2003"
 - Centers for Disease Control and Prevention Healthcare Infection Control Practices Advisory Committee (HICPAC)
 - U.S. Department of Health and Human Services Centers for Disease Control and Prevention (CDC) Atlanta, GA 30333

Areas to Inspect

3

Environmental Vehicles Implicated in Hospital Infections

- Improperly functioning HVAC systems
- Air filters
- · Backflow of contaminated air
- False ceilings
- · Hospital vacuum cleaners
- Elevators
- · Fiberglass duct insulation

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Contributions of HVAC Systems

- Decreased performance
- · Filter inefficiencies
- Improper installation
- Poor maintenance
- Temperature/humidity control

5

Suspect Systems

- Personal Hygiene Practices
- HVAC Systems
- Water Supply Systems
- Air Concentrations in Critical Care Areas
- "Wet" Equipment
 - Ventilators, Catheters, Medical Devices
 - Hemodialysis, Hydrotherapy, Ice Machines
- Surface Cleaning and Disinfection
 - Routine and Terminal

Chain of Infection

7

Chain of Infection

- Adequate number of pathogenic organisms (dose)
- · Pathogenic organisms of sufficient virulence
- A susceptible host
- An appropriate mode of transmission of the organism from source to host
- The correct portal of entry into the host
 - Inhalation, Contact, Aspiration, Ingestion

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Assessing Infectious Agents in The Environment

- Fomite: an object that may be contaminated with infectious organisms and serve [as a pathway] in their transmission
- The organism can survive after inoculation onto a fomite.
- The organism can be cultured from the in-use fomite.
- The organism can proliferate in-on the fomite.
- Studies have shown an association between exposure to the fomite and infection.
- A subset of patients exposed to those fomites show an association between exposure and infection.
- Decontamination of the fomite results in the elimination of infection transmission.

9

Operating Rooms

- Microbial level in OR air is directly proportional to the number of people moving in the room
 - Minimize personnel traffic during operations
- Laser plumes and surgical smoke
 - Staphylococcus
 - Corynebacterium spp.
 - Neisseria spp.

Contact with Environmental Surfaces

- Patients and health-care workers contribute significantly to the contamination of surfaces
 - Vancomycin-resistant Enterococcus faecium [VRE]
 - Clostridium difficile

11

Gram-negative HAI Bacteria

- Acinetobacter
- Burkholderia
- Enterococci
- Escherichia [E. coli]
- Klebsiella
- Legionellae
- Pseudomonas
- Shigella

Gram-negative Bacteria

Infections

- Surgical sites
- Post-surgical

Reservoirs

- Soil
- Water
- Surfaces
 - Dry & moist

13

Gram-negative Bacteria

- Rarely associated with airborne transmission
 - Require moist environments for persistence and growth.
- Acinetobacter spp.
 - Can withstand the inactivating effects of drying
- Strict adherence to hand hygiene helps prevent the spread of both Acinetobacter spp. and Enterobacter spp.

Gram-negative Bacteria

- Contact with Water and Aqueous Solutions
 - Legionellae
 - Pseudomonas aeruginosa
 - Nontuberculous mycobacteria (NTM)
 - Acinetobacter spp.
 - Enterobacter spp
- Inhalation of aerosols generated from showers and faucets

15

Pseudomonas (aeroginosa)

Infections

- Surgical sites
- Post-surgical
- Medical devices
- Ventilators
- Catheters

Reservoirs

- Skin
- Soil
- Water
- Surfaces
 - Moist
- Hypoxic atmospheres

Gram-negative Bacteria[Water & Moist Environments]

- Enterobacter spp.
 - Humidifier water
 - Intravenous fluids
 - Unsterilized cotton swabs
 - Ventilators
 - Rubber piping on a suctioning machine
 - Blood gas analyzers
- Bloodstream infections, pneumonia, and urinary tract infections
- Especially ICU's

17

Enterobacter

Infections

- Pneumonia
 - 5% of infections
- Surgical sites
 - 10% of infections

Reservoirs

- GI tract
- Skin
- Dust

Gram-negative Bacteria[Water & Moist Environments]

- Burkholderia cepacia
 - Distilled water
 - Contaminated solutions and disinfectants
 - Dialysis machines
 - Nebulizers
 - Water baths
 - Ventilator temperature probes
 - Mouthwash (Intrinsically-contaminated)

19

Burkholderia (cepacia)

Infections

Reservoirs

Chronic lung diseases

• Skin

Soil, dust

Water

Gram-negative Bacteria [Water & Moist Environments]

- Acinetobacter spp.
 - Medical equipment that collects moisture
 - Mechanical ventilators, cool mist humidifiers, vaporizers, and mist tents
 - Room humidifiers
 - Especially ICU's
- Average infection rates are higher from July through October

21

Gram-negative Bacteria [Water & Moist Environments]

- · Acinetobacter spp.
 - Also found on dry environmental surfaces
- The survival periods of Acinetobacter baumannii and Acinetobacter calcoaceticus on dry surfaces approximated that for S. aureus (e.g., 26–27 days)

Acinetobacter (baumannii)

Infections

- Surgical site
- Post-surgical
 - 80% of ICU infections
- Ventilators
- Blood products
- A. baumannii can survive on skin & dry surfaces for weeks

Reservoirs

- Skin
- Soil & dust (floors)
- Surfaces
 - Moist & dry
- Potable water systems
 - Sink traps

23

Klebsiella

Infections

- Surgical sites
- Post-surgical
- Ventilators
- Catheters (venous)

Reservoirs

GI Tract

Nontuberculous Mycobacteria (NTM)

- Acid-fast bacilli (AFB) commonly found in potable water
- Many NTM are of low pathogenicity, and some measure of host impairment is necessary
- Person-to-person acquisition of NTM infection does not appear to occur
- NTM are spread via all modes of transmission associated with water
 - Ingestion, Aspiration, Inhalation, Penetration

25

Nontuberculous Mycobacteria (NTM)

- Mycobacterium chelonae, M. gordonae, M. xenopi
 - Bronchoscopy and gastrointestinal endoscopy
- Mycobacterium xenopi
 - Can survive in water at 113°F (45°C)
 - Can be isolated from hot water taps
- Mycobacterium kansasii, M. gordonae, M. fortuitum, M. chelonae
 - Cannot tolerate high temperatures; cold water lines, taps.
- NTM have a high resistance to chlorine
 - Tolerate free chlorine concentrations of 0.05–0.2 mg/L (0.05–0.2 ppm) found at the tap

Nontuberculosis mycobacteria

Infections

- Medications
- Medical devices
- Environ exposures
 - No human-to-human
- Catheters (urinary)
- Post-LASIK
- Pulmonary infections
- · Skin, soft tissue
 - Post-cosmetic surgery

Reservoirs

- Skin
- · Soil, dust
- Water
- Damp materials

27

Gram-positive HAI Bacteria

- Candida
- Chlmydia
- Clostridium
- Neisseria
- Staphylococcus
- Streptococcus

Air Transmission: General

- If environmental reservoirs are disturbed.
 - (soil, water, dust, and organic matter)
- Droplets produced during a sneeze or cough
 - If within 3 feet of the potential host
- Via droplet nuclei produced after a sneeze or cough
 - Mycobacterium tuberculosis
 - Aspergillus fumigatus
 - spores resist desiccation, can remain airborne indefinitely in air currents

29

Air Transmission: Bacteria

- Gram-positive cocci are important HA pathogens
 - Staphylococcus aureus
 - group A streptococci
- Resistant to inactivation by drying
- Can persist In the environment and on environmental surfaces for extended periods
- Transmission occurs primarily via contact and droplets
- Surgical site infections (SSIs) have been traced to airborne transmission
 - From staff in OR's, burn units, NICU's to patients

Air Transmission: Bacteria

- · Other gram-positive bacteria: Bacillus spp
- Infections commonly secondary to environmental contamination
- · Bacillus cereus
 - Maternity, pediatric, intensive care, and bronchoscopy units
- · Mycobacterium tuberculosis
 - Human-to-human
 - Can travel long distances

31

Candida (albacans)

Infections

- Post-surgical
- ICU
- Catheters (venous)

Reservoirs

Prevented by high pH

Clostridium (difficile)

Infections

- Spore forming
- Anaerobic
- Antibiotic-induced

Reservoirs

- GI tract
- Surfaces
 - Dry & moist

33

Cornynebacteria (diptheria)

Infections

- Prosthetic heart valves
- Shunts
- Catheters

Reservoirs

- Skin
- Nasopharynx, mucosa
- · Soil, plants
- Food products
- Water

Escherichia (coli)

Infections

Surgical sites

Blood products

Reservoirs

GI tract

• Skin

Surfaces

35

Enterococcus (faecilis)

Infections

Reservoirs

GI tract

Staphylococcus (aureus)

Infections

- Surgical sites
- Post-surgical (frequent)
- Catheters (venous)
- Blood products
- Human-to-human
 - Staff hygiene (lack)
 - Pet-to-human
- Prevention
 - Cleaning, routine & terminal

Reservoirs

- Skin
 - Perspiration present
- Nasopharynx (20%)
- Surfaces
 - Dry & moist
- Survival on surfaces
 - 3 months on privacy curtains (polyester)
 - 1 minute @ 78 °C
 - 10 minutes @ 64 °C

37

Streptococcus (pneumonae)

Infections

Reservoirs