

# MRSA Control Efforts Revved Up

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During the past year, more than 75% of infection prevention and control professionals have taken extra steps to prevent transmission of methicillin-resistant *Staphylococcus aureus* in health care facilities, according to results of a survey conducted by the Association for Professionals in Infection Control and Epidemiology.

The nationwide survey was conducted in the wake of a 2007 report that showed a surprisingly high prevalence of MRSA in hospitals—eight times higher than previously estimated, and not limited to the intensive care units, said Janet E. Frain, R.N., president of the Association for Professionals in Infection Control and Epidemiology (APIC) and a certified professional in health care quality.

"We conducted the Pace of Progress poll among our members to find out if news about the escalating problem of MRSA had led to increased efforts on the part of health care institutions to combat MRSA in the 1 year since our study results were released," she said. "The answer is a resounding 'yes.'"

The poll results included data from 2,041 infection control professionals, representing 17% of the APIC's nearly 12,000 members.

Staff education was the most common new action among those who reported taking additional steps to prevent and control MRSA (64%). Other measures included stricter use of gowns and gloves for anyone who tests positive for MRSA (53%); improved compliance with house cleaning, equipment cleaning, and decontamination practices (49%); and targeted patient MRSA screening (49%).

But more than half of the survey respondents (54%) also said their institutions were not doing as much as they could or should to prevent and control MRSA.

"The reason for that is not going to be news to anyone," said Kathy Warye, CEO of APIC. "We are still seeing some infection control professionals struggling to get the support they need." But the overall trend is encouraging, she said. "We believe that the prevalence study results empowered our members to acquire additional resources, including adding extra staff dedicated to infection control."

Meanwhile, the death rate from MRSA is estimated to be more than 2.5 times higher than the death rate from *Staphylococcus aureus* organisms that are susceptible to methicillin, according to APIC.

Support from the health care administration is essential for successful infection control procedures, whether the organism is MRSA or any other pathogen such as *Pseudomonas* or *Clostridium difficile*.

"We are talking about a complete culture change within the organization, where infection prevention and control is everyone's job," Ms. Frain said.

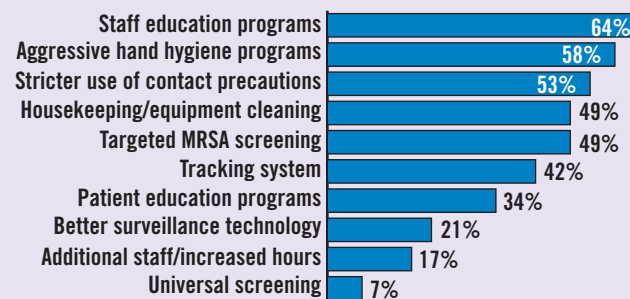
"I have a CEO who gets it," said Marcia Patrick, R.N., the infection control director for the MultiCare Health System in Tacoma, Wash. "In October 2008, Medicare will stop paying for things that shouldn't happen,

such as urinary tract infections from Foley catheters. If hospitals aren't working on reducing these things, they are going to be in a world of hurt financially." Support for infection control practices has to come from the top down and from the bottom up to be successful, she said.

Infection control strategies that have been implemented at her facility include improving hand hygiene by installing alcohol gel dispensers, adding an infection control professional to the staff, and using data-mining software to review culture reports and identify infections quickly.

For information about preventing infections, visit [www.apic.org](http://www.apic.org), or [www.preventinfection.org](http://www.preventinfection.org). ■

## Newly Implemented MRSA Interventions



Note: Based on a survey of 1,544 APIC members who adopted interventions.

Source: Association for Professionals in Infection Control and Epidemiology

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Reference: 1. Thiboutot D, Thieroff-Ekerdt R, Graupe K. Efficacy and safety of azelaic acid (15%) gel as a new treatment for papulopustular rosacea: results from two vehicle-controlled, randomized phase III studies. *J Am Acad Dermatol*. 2003;48:836-845.

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