



Risks of infection control in the anesthesiology department

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Background

- Healthcare-associated infections (HAI) infections acquired by patients during their stay in a hospital or another healthcare setting [ESCD];
- Anesthesia work area (equipment, supply cart et al.) is wide, fertile for all types of pathogens;
- Work environment and staff's hands have direct contact with patients;
- It is vital to follow infection control infection control principles to ensure the patients and staff safety.

Objective and methods

- Objective To characterize the risks of the infection control in the anesthesiology and recommendations for their improvement;
- Methods a meta-analysis was performed, including a systematic literature selection. Literature was searched in PubMed, Cochrane Library, Embase. A total 15 scientific articles and guidelines were included;
- Authors defined the main risks of infection control and their importance in the anesthesiology department.

Results

Defined infection control risk groups

- 1. Hand hygiene;
- 2. Personal protective equipment;
- 3. Invasive procedures;
- 4. Aseptic and safe medication preparation, administration;
- 5. Equipment and environmental cleaning.



1. Hand hygiene

- The main risk factor of HAI;
- Anesthesia providers have poor hand hygiene – pathogenic microorganisms can contaminate work area;
- Need to be performed at the minimum before aseptic procedures, touching cart, after removing gloves, entering/exiting the operating theatre;
- Recommendations educate staff, follow the WHO hand hygiene recommendations, available hand sanitizer dispensers – especially recommended wearable dispensers with reminders.

Sites of operating room contamination after simulation



https://images.journals.lww.com/anesthesia-analgesia/Original.00000539-201504000-00023.F1-23.jpeg

2. Personal protective equipment

- Patient and staff safety protects from transmitting and contracting infections;
- Recommendations properly wear, remove, and dispose of the gear, hand hygiene before applying and after removing, refrain from touching surfaces and face;
- Double gloves during airway management reduce risk of hand contamination.

3. Invasive procedures

- Expose patients and staff to risk of infection;
- Patients skin preparation reduces the risk of infection;
- Aseptic non-touch technique;
- Recommendations follow manufacturer recommendations policy for the proper use of skin prep agents, close doors during operative procedures, minimize staff traffic in/out of operating room.

WHAT IS ANTT?

Aseptic Non-Touch Technique



ANTT is an international set of principles that are aimed to standardise practice and increase patient safety during procedures like wound care and catheterisation



INFECTION PREVENTION AND CONTROL PRINCIPLES OF ANT





NEVER CONTAMINATE KEY PARTS OF THE EQUIPMENT OR THE PATIENT'S SUSCEPTIBLE SITE

TOUCH NON KEY PARTS OF THE EQUIPMENT WITH CONFIDENCE



TAKE APPROPRIATE INFECTION PREVENTION AND CONTROL PRECAUTIONS

4. Aseptic and safe medication preparation, administration

- Improper use or reuse of needles, syringes, et al. increase multiple-drug resistant organisms;
- Lack of injection port disinfection, and contact with nonsterile equipment may increase the risk of contaminated with potentially pathogenic bacteria
- Aseptic non-touch technique;
- Recommendations avoid recapping, utilization at sharp container, do not reuse syringes, clean access diaphragm of medication or outside of an ampule, single-dose medications, disinfect injection ports.

5. Equipment and environmental cleaning

- Anesthesia machines and work areas can become contaminated of potentially pathogenic microbes – transmitted to patients through direct contact with contaminated equipment, hands of anesthesia providers, or contaminated medications;
- Recommendations use protective covering, laryngoscope reusable handles and blades require a high level of disinfection; single-use breathing system filter;
- The most important clean and disinfect high-touch surfaces between patients and end of the day.

Conclusions

- There are available extensive literature of the infection control risks in anesthesiology;
- In this meta-analysis, the main groups of infection control risks were defined, their importance was substantiated, and recommendations were given;
- Can be used by hospitals to develop internal infection control recommendations, audit protocols in anesthesiology departments;
- Anesthesia providers are closely related to patient safety, it is important to update internal infection prevention and control guidelines and educate healthcare professionals.

References (I)

- 1. American Association of Nurse Anesthesiology. 2023. Infection Prevention and Control Guidelines for Aneshesia Care. Available from: https://issuu.com/aanapublishing/docs/4_-infection_prevention_and_control_guidelines_for?fr=sOTEzMjU2NDAxMjU
- 2. Association of Anaesthetists, Medicines and Healthcare products, Regulatory Agency Difficult Airway Society. 2020. Infection prevention and control 2020. http://dx.doi.org/10.21466/g.IPAC2.2020
- 3. Association of Anaesthetists, Medicines and Healthcare products, Regulatory Agency Difficult Airway Society. 2020. Infection prevention and control 2020. http://dx.doi.org/10.21466/g.IPAC2.2020
- 4. Biddle C. 2009. Semmelweis revisited: hand hygiene and nosocomial disease transmission in the anesthesia workstation. AANA J. ;77(3):229-37. Available from: https://pubmed.ncbi.nlm.nih.gov/19645173/
- 5. Birnbach D.J., Rosen L.F., Fitzpatrick M., Carling P., Arheart K.L., Munoz-Price L.S. 2015 Double gloves: a randomized trial to evaluate a simple strategy to reduce contamination in the operating room. Anesth Analg.;120(4):848-52. doi: 10.1213/ANE.0000000000000330.
- 6. Birnbach D.J., Rosen L.F., Fitzpatrick M., Carling P., Arheart K.L., Munoz-Price L.S. 2015. A New Approach to Pathogen Containment in the Operating Room: Sheathing the Laryngoscope After Intubation. Anesth Analg.;121(5):1209-14. doi: 10.1213/ANE.0000000000000854.
- 7. European Centre for Disease Prevention and Control (ECDC). Healthcare-associated infections. Available from: https://www.ecdc.europa.eu/en/healthcare-associated-infections
- 8. Kishi D., Videira R.L. 2011. Description of nosocomial infection prevention practices by anesthesiologists in a university hospital. Rev Bras Anestesiol. doi: 10.1016/S0034-7094(11)70022-8.

References (II)

- 8. Loftus R.W, Campos J.H. 2019. The anaesthetists' role in perioperative infection control: what is the action plan? British Journal of Anaesthesia, 123 (5): 531e534, doi: 10.1016/j.bja.2019.07.013
- 9. Munoz-Price, L., Bowdle, A., Johnston, B., Bearman, G., Camins, B., Dellinger, E., Birnbach, D. 2019. Infection prevention in the operating room anesthesia work area. *Infection Control & Hospital Epidemiology, 40*(1), 1-17. doi:10.1017/ice.2018.30
- 10. Plemmons M.M., Marcenaro J., Oermann M.H., Thompson J., Vacchiano C.A. 2019. Improving infection control practices of nurse anesthetists in the anesthesia workspace. Am J Infect Control.;47(5):551-557. doi: 10.1016/j.ajic.2018.12.009.
- 11. Schnetzinger M., Assadian O., Markstaller K., Klein KU. 2022. Infektionsprävention im OP: praxisorientierte Empfehlungen für AnästhesistInnen [Infection prevention in the operating theater: practice-oriented recommendations for anesthesiologists]. Anaesthesiologie. 72(2):121-127. German. doi: 10.1007/s00101-022-01239-z.
- 12. Sharma A., Fernandez P.G., Rowlands J.P., Koff M.D., Loftus R.W. 2020. Perioperative Infection Transmission: the Role of the Anesthesia Provider in Infection Control and Healthcare-Associated Infections. Curr Anesthesial Rep;10(3):233-241. doi: 10.1007/s40140-020-00403-8.
- 13. World Health Organization [WHO]. 2009. WHO guidelines on hand hygiene in health care. Available from: https://iris.who.int/bitstream/handle/10665/44102/9789241597906_eng.pdf?sequence=1
- 14. Yuan I., Feldman J.M., 2016. HAIs: When in Doubt, Blame Anesthesia. Could They Be Right?. MSE Circulation 122,210. Volume 31, No. 1. Available from: https://www.apsf.org/article/hais-when-in-doubt-blame-anesthesia-could-they-be-right/

Thank you for your attention!

