HEN Hot Topics
Working Together to Make Healthcare Better

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Overprescribing Antibiotics in Hospitals Leads to $163 Million in Avoidable Costs

Antibiotics are being widely overprescribed in U.S. hospitals, according to a new study released by the Centers for Disease Control and Prevention. The study was published in the October issue of *Infection Control and Hospital Epidemiology*.

The infection-fighting drugs are being given to patients too often, and many doctors are using more than one antibiotic to fight serious infections when it's not necessary. Along with risking patient safety because of the growing threat of antibiotic resistance, the practice cost an extra $163 million, the study said.

Pharmacy data from 2008-2011 at more than 500 hospitals showed that 78 percent of them had examples of potentially unnecessary combinations of antibiotics being given for two or more days, with a total of more than 32,000 cases of redundant antibiotics treatment.

Overall, that added up to almost 150,000 days of potentially inappropriate antibiotic therapy and $13 million in unneeded healthcare costs. Extrapolated to all U.S. hospitals over the same time period, an estimated $163 million could have been saved through appropriate prescribing, the study noted.

Peer Pressure May Improve Hand-hygiene Compliance

Peer pressure might be the key to boosting hand hygiene compliance in hospitals, according to a new study published in *Infection Control & Hospital Epidemiology*.

Researchers from the University of Iowa's Carver College of Medicine used an automated hand-hygiene monitoring system to observe staff in a 20-bed medical center intensive care unit at a large university hospital, according to the study. The technology detected whether healthcare workers washed their hands before coming into a patient's room and estimated the location of other healthcare workers with respect to the workers coming into or out of a room.

Over a 10-day period, researchers identified 47,694 hand-hygiene opportunities. When a healthcare worker was alone, the observed adherence rate was 20.85 percent. But when other healthcare workers were nearby, the adherence rate was 27.9 percent, according to the study.

However, compliance may be higher because the number recorded by the automated system did not count dispensing events inside the patient's room.

Researchers also found adherence increased with the number of nearby healthcare workers, leading them to conclude that presence and proximity of other healthcare workers was associated with higher hand-hygiene rates. Overall, adherence was slightly higher at night and higher among nurses than doctors.

Some hospitals take a proactive approach to hand-hygiene compliance. For example, MetroHealth Medical Center in Cleveland hired four hand-washing monitors, who observed and tracked who washed their hands as they walked in and out of patient rooms. After this initiative, central line-associated bloodstream infections dropped 35 percent, ventilator-associated pneumonia fell 71 percent, and surgical site infections decreased by 64 percent, while hospital-acquired infections at the hospital as a whole fell 38 percent.

Save the Date

Please note: While the information below is a list of planned programs for 2014, at this time not all programs can be accessed online for registration.

Sept. 17	Webinar: Preventing Hospital-Acquired VTE in 2014: Successful Strategies
Sept. 18	Adverse Drug Events
Sept. 22	Annual Leadership Summit
Sept. 29	Geriatric Emergency Department Guidelines
Oct. 14	Webinar: 2014 Fall Prevention Update
Oct. 21	Improving Surgical Safety and Patient Outcomes
Nov. 10	Statewide Perinatal Safety Collaborative – Fall Learning Session
Nov. 11	A Call to Action: Advance Care Planning Provider Summit
Nov. 19	2015 Joint Commission Hospital Accreditation Update
Nov. 20	Patient and Family Engagement across the Continuum and Across Cultures in N.J.
Dec. 1	Honoring our Military: Caring for Those Who Have Served

Click here to register.

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