

Health Watch USAsm Newsletter

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Member of the National Quality Forum and a designated "Community Leader" for Value-Driven Healthcare by the U.S. Dept. of Health and Human Services

What Nurses Have Taught Us About Ebola

A short presentation on the history of Ebola in the United States as described by a nurse -- Kathy Day, RN. Health Watch USA presentation Dec. 17, 2014. You Tube: <u>http://youtu.be/avRKt9lvp0M</u> Ebola Congressional Testimony <u>by Deborah Burger, RN</u>



Reduction of Surgical Infections with MRSA Screening and Decolonization

James Davis IV, MSN, RN from the Pennsylvania Patient Safety Authority presents the results of a study demonstrating a reduction in surgical site infections with MRSA screening and decolonization using chlorhexidine and mupirocin. Health Watch USA Meeting Dec. 17, 2014. YouTube Video: <u>http://youtu.be/Fj1lBe87hcs</u>



MRSA Surveillance and Isolation - The Success at the Louisville VA Medical Center

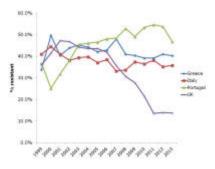
Raul Nakamatus, MD - Assistant Professor at the Division of Infectious Diseases at University of Louisville and at the Robley Rex VA Medical Center presents their success in MRSA reduction using a protocol that includes Surveillance and Isolation. Download lecture slides at:

You Tube: <u>http://youtu.be/q4-YzdtLL6c</u>

http://www.healthwatchusa.org/conference2014/Presentations/nakamatsu/07-Nakamatsu UNIVERSAL MRSA SURVEILLANCE.pdf

ECDC Data shows progressive, depressing increase in antibiotic resistance in Europe.

"In summary, it's not all doom and gloom. The reductions in MRSA in the UK and elsewhere show that reducing the transmission of these antibiotic resistant bacteria can be done." To the right is Figure 4 from the blog which shows MRSA antibiotic resistance in Europe and the significant decrease in the UK. Should we in the USA be considering adoption of the UK MRSA prevention bundles which include active detection (screening) and isolation ?



http://www.micro-blog.info/2014/12/ecdc-data-shows-progressive-depressing-increase-inantibiotic-resistance-in-europe/

Kentucky Regulation on Reporting of Dangerous Bacteria Emerges from Comment Period With Few Changes

The proposed Kentucky regulation which required the reporting of dangerous bacteria has come out of the comment period with only a few changes. If anything, the definition of an outbreak has been improved and now applies to all reportable infections. <u>Download Regulation</u>

The comments from Health Watch USA, which are contained in the regulation comments are as follows:

"I would like to offer my support for the revisions in Regulation 902.2.020 on the reporting of dangerous pathogens to the State Health Department. Over the last two years Kentucky has been featured in national news regarding both a very deadly strain of MRSA outbreak and CRE outbreak, along with having the fourth highest rate of MRSA Bacteremia in the 50 states (Data from Hospital Compare in the Healthcare Associated Infection Section.) All of this is just some of the evidence which points to the need for engagement with the Kentucky State Health Dept. for a more accurate and complete tracking system ... Centralized data collection and a coordinated effort to confront this problem is needed. I would thus, strongly recommend the approval of this regulation as submitted."

"The regulation better defines what an outbreak is, which to some, including myself, believe has cause laxity in our dangerous pathogens reporting system. Some may ignore the necessity for public safety and state that this change will be too cumbersome for providers. However, it is far less cumbersome than that of other states which require reporting of all infections, not just outbreaks."

"In addition, the Regulation gives the Kentucky Health Dept. much needed access to data which has been submitted to the National Healthcare Safety Network, and provides for electronic laboratory reporting of dangerous pathogens to the Kentucky Health Dept. in the future. Neither of these latter two provisions should impose a significant burden on the providers."

Scope disinfection failure suspected in superbug cluster, leads UPMC to alter methods

TribLIVE: "UPMC started investigating in November 2012 when several patients tested positive for a superbug called CRE, or carbapenem-resistant enterobacteriaceae. Top health authorities call the bug "nightmare bacteria" because it can be deadly, and most antibiotics are ineffective against it. None of the patients at UPMC died as a direct result of the infection, officials said." http://triblive.com/news/healthnews/6955957-74/scopes-infection-upmc#ixzz3Kg5aoSMb

Adverse Events

23% of Massachusetts adults experienced a medical error, survey finds

Harvard School of Public Health: "Nearly one in four have had a real -life experience with this issue in the last five years, and half label it as having serious health consequences. A third of the public now sees this issue as a serious problem for the Commonwealth."

https://cdn1.sph.harvard.edu/wp-content/uploads/sites/94/2014/12/MA-Patient-Safety-Report-HORP.pdf Download Article Medicare Cuts Payments To 721 Hospitals With Highest Rates Of Infections, Injuries http://kaiserhealthnews.org/news/medicare-cuts-payments-to-721-hospitals-with-highest-rates-of-infections-injuries/

Medical Devices

When the Law fails to Protect.

An Op-Ed on how Federal Oversight of Medical Devices (510k Process) is NOT Assuring Patient Safety. <u>http://www.philly.com/philly/blogs/healthcare/When-the-law-fails.html#disqus_thread</u>

What Money? Financial Ties of FDA Device Advisers are Often Undisclosed

"Many of the physicians and other experts who sit on FDA advisory panels to review medical devices have financial ties to manufacturers, but the regulator has failed to disclose the relationships, according to an analysis of corporate, state and federal data by The Wall Street Journal."

http://blogs.wsj.com/pharmalot/2014/12/09/what-money-financial-ties-of-fda-device-advisers-are-oftenundisclosed/

For Sale: "Your Name Here" in a Prestigious Science Journal

Scientific American: "Other publishers have begun to combat the flood of dubious papers. Damian Pattinson, editorial director of PLoS ONE, says the journal instituted safeguards last April. "[E]very meta-analysis we get has to go through a specific editorial check..." that forces authors to provide additional information, including a justification for why they performed the study in the first place, he says. "As a result of this, the rate of papers that are actually getting to reviewers has dropped by about 90 percent."

http://www.scientificamerican.com/article/for-sale-your-name-here-in-a-prestigious-sciencejournal/?WT.mc_id=SA_DD_20141218

Health Watch USA Meeting: Jan. 21, 2015 at 7:00 pm ET.

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