

## INFECTION

## Catheter-associated UTIs can be controlled with simple interventions

Patients in neurological or spinal intensive care units often have a high risk of UTIs owing to indwelling catheter use. Now, research shows that implementation of simple interventions can reduce the incidence of UTIs to virtually none in this patient population.

After consultations between physicians, nurses and administrators across five intensive care units at the Northwestern Memorial Hospital, Chicago, a plan of action was created, which identified several key points of intervention including considering the appropriateness of indwelling catheter use, changing gloves frequently during routine care, maintenance of a closed system and bowel management. After following this plan of action, rates of catheter-associated UTIs declined significantly from 8.18 to 0.93 per 1,000 catheter days over a study period of 6 months. A similar decline in

standardized infection ratio was also reported, from 2.16 to 0.37.

Notably, use of indwelling catheters during this period was below the National Health Safety Network 25<sup>th</sup> percentile value, highlighting that other forms of catheterization should be considered as viable alternatives to indwelling catheters in these patients.

These findings demonstrate that, by implementing a comprehensive UTI reduction strategy, the incidence of UTIs among patients in neurological or spinal intensive care can be reduced to virtually none, largely through use of interventions that are neither technically nor economically demanding.

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