

## Research Compact

### Tags

Octenisan, VRE, Nosokomial

### Title

**Reduction of Nosocomial Blood stream infections and nosocomial Vancomycin Resistant *Enterococcus faecium* on an intensive Care Unit After Introduction of Antiseptic Octenidine-based Bathing**

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### Source

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### Aim of the study

As reaction to the emergence of vancomycin-resistant *Enterococcus faecium* (VRE) and increasing numbers of nosocomial cases, a universal Octenisan®-based bathing procedure was introduced at an intensive care unit in Cologne, Germany.

### Study design

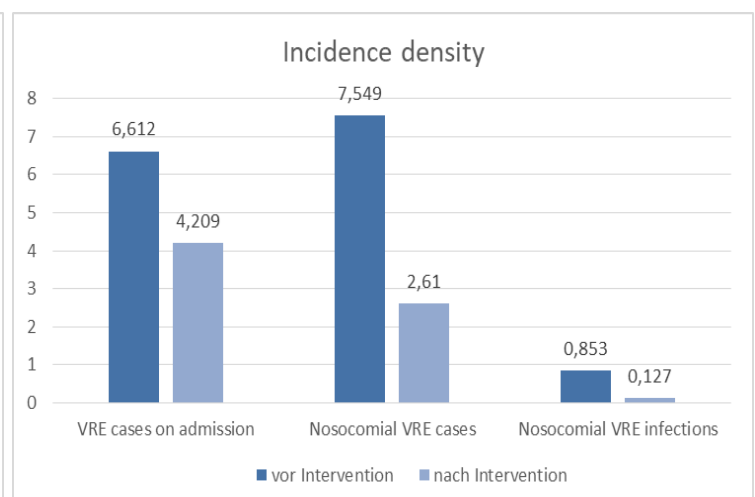
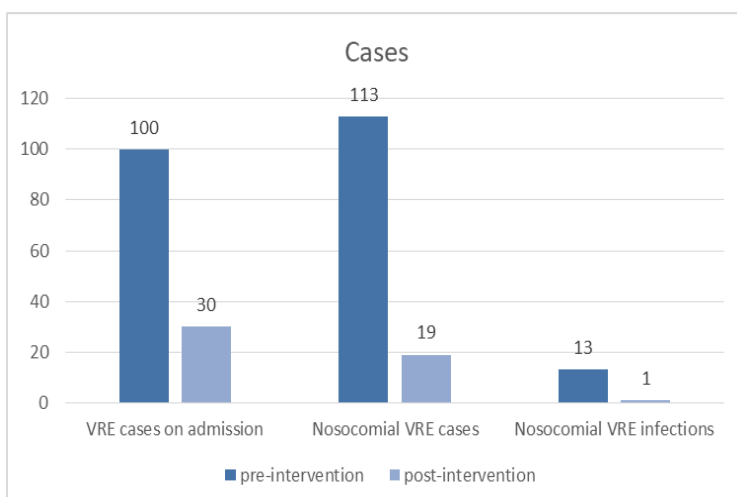
Before-after-intervention

### Methods

Between 01/2012 und 03/2014 patients were screened for VRE on admission and twice weekly. Starting with the intervention (08/2013) patients were bathed with Octenisan® daily. Surveillance of VRE colonization and infection was performed

### Results

The incidence density of nosocomial VRE cases (colonization, infection) was significantly reduced after intervention and decreased significantly from 7.55 per 1000 patient days to 2.61 per 1000 patient days ( $p = 0.001$ ). Thus, the number of post-interventional cases was 65% lower than pre-interventionally. Furthermore the number of nosocomial infections was reduced from 13 to 1 cases after intervention ( $p = 0.049$ ).



### Conclusion

**The implementation of a universal Octenisan®-based bathing procedure led to a significant reduction of nosocomial cases of nosocomial vancomycin-resistant *Enterococcus faecium*.**