

Impact of screening and identifying methicillin-resistant *Staphylococcus aureus* carriers on hand hygiene compliance in 4 intensive care units

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Mots-cl�s	critical care [9], evaluation study [10], Infection Control [11], MRSA [12], practice improvement [13]
R�sum� en anglais	<p>Background Our objective was to assess the impact of screening and identifying methicillin-resistant <i>Staphylococcus aureus</i> (MRSA) carriers as a single measure in 4 intensive care units (ICUs). Methods An evaluative study including two 6-month periods was conducted prospectively. The evaluation concerned the hand hygiene compliance (HHC) for contacts with MRSA carriers versus contacts with noncarriers (comparison C1, main objective) and for a period of absence of identification (P1) versus a period of identification (P2) (comparison C2) and MRSA cross transmission (P1 vs P2) (comparison C3) measured with 2 indicators. Results Overall, 1326 opportunities of hand hygiene were observed. Concerning C1, the HHC for contacts with MRSA carriers was 42.5% versus 43.1% for contacts with noncarriers (not significant). This absence of difference was recorded whatever the ICU specialty, the category of personnel, and the nature of contacts. Concerning C2, the HHC in P1 was 44.8% versus 48.5% in P2 (not significant). Concerning C3, no significant difference was identified between the 2 periods. Conclusion We did not identify any advantage by using screening and identifying MRSA carriers in those 4 ICUs in which no specific strategy of additional contact measures was implemented for MRSA carriers.</p>
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