to investigate whether daily bathing with a soap-like solution of 4% chlorhexidine (CHG) followed by water rinsing (CHGwr) would decrease the incidence of hospital acquired infections (HAI) in intensive care settings.” Pallotto et al (2018).

Abstract:

Objectives: to investigate whether daily bathing with a soap-like solution of 4% chlorhexidine (CHG) followed by water rinsing (CHGwr) would decrease the incidence of hospital acquired infections (HAI) in intensive care settings.

Methods: randomized, controlled trial; infectious diseases specialists were blinded to the intervention status. All patients admitted to the Intensive Care Unit (ICU) and to the Post-operative Cardiosurgical Intensive Care Unit (PC-ICU) of the University Hospital of Perugia were enrolled and randomized to intervention arm (daily bathing with 4% CHGwr) or to control arm (daily bathing with standard soap). The incidence rate of acquisition of HAI was compared between the two arms as primary outcome. We also evaluated the incidence of bloodstream infections (BSI), central line-associated BSI (CLABSI), ventilator associated pneumonia (VAP), and catheter-associated urinary tract infections (CAUTI) and 4% CHGwr safety.

Results: Four hundred forty-nine patients were enrolled, 226 in treatment arm and 223 in control arm. Thirty-four patients out of 226 (15%) and 57/223 (25.6%) suffered from at least
an HAI in intervention and control arm, respectively (p=0.008); 23.2 and 40.9 infections/1000 patient-days were detected in intervention arm and control arm, respectively (p=0.037). Incidence of all bloodstream infections (BSI plus CABSI) was significantly reduced in the intervention arm (9.2 vs 22.6 infections/1000 patient-days, p=0.027); no differences were observed in the mortality between the two arms.

Conclusions: daily bathing with 4% CHGwr significantly reduced HAI incidence in intensive care settings.

ClinicalTrial.gov registration: NCT03639363

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