Intravenous literature: Dorman, A. and Dainton, M. (2011) Reducing haemodialysis access infection rates. British Journal of Nursing. 20(10), p.621-627.

Abstract:

Infections are the second most common cause of vascular access loss in the long-term haemodialysis patient, and recent years have seen an increase in healthcare-associated infections (HCAIs) associated with vascular access (Suhail, 2009). There have been a number of drivers including publication guidelines (Department of Health, 2006; 2007) and local protocols providing evidence-based recommendations that, when implemented, can reduce the risk of these infections. In England, the selection of bloodstream infections caused by methicillin resistant staphylococcus aureus (MRSA) as a significant clinical outcome has led to a vast amount of work in this area. Root cause analysis of individual infections (by the clinical teams when these occur) in many specialities identified areas where practice could be improved, including practice relating to vascular access within the renal setting. Manufacturers have also supported this work by focusing on developing products that are designed to reduce the likelihood of infections occurring. One product identified and used within the NHS is Chloraprep.