



This outbreak highlights the importance of prompt reporting and investigation of incident HCV infection and the need for adherence to basic infection control procedures by health care personnel” Calles et al (2016).

Abstract:

Background: From March-May 2013, 3 cases of acute hepatitis C virus (HCV) infection were diagnosed among elderly patients residing at the same skilled nursing facility (facility A) and who received health care at hospital X during their likely exposure period.

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Methods: We performed HCV testing of at-risk populations; quasispecies analysis was performed to determine relatedness of HCV in persons with current infection. Infection control practice assessments were conducted at facility A and hospital X. Persons residing in facility A on September 9, 2013, were enrolled in a case-control study to identify risk factors for HCV infection.

Results: Forty-five outbreak-associated infections were identified. Thirty cases and 62 controls were enrolled in the case-control study. Only podiatry (odds ratio, 11.6; 95%

confidence interval, 2.4-57.2) and international normalized ratio monitoring by phlebotomy (odds ratio, 6.7; 95% confidence interval, 1.7-26.6) at facility A were significantly associated with case status. Infection control lapses during podiatry and point-of-care testing procedures at facility A were identified.

Conclusions: HCV transmission was confirmed among residents of facility A. The exact mode of transmission was not able to be identified, but infection control lapses were likely responsible. This outbreak highlights the importance of prompt reporting and investigation of incident HCV infection and the need for adherence to basic infection control procedures by health care personnel.

Reference:

Calles, D.L., Collier, M.G., Khudyakov, Y., Mixson-Hayden, T., VanderBusch, L., Weninger, S. and Miller, T.K. (2016) Hepatitis C virus transmission in a skilled nursing facility, North Dakota, 2013. *American Journal of Infection Control*.

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