

Πίνακας 1. Σχέση μεταξύ βελτίωσης της συμμόρφωσης στην εφαρμογή της Υγιεινή των Χεριών και της επίπτωσης των λοιμώξεων που συνδέονται με χώρους παροχής (1975– 2008).

Ο πίνακας έχει αντιγραφεί από WHO Guidelines on Hand Hygiene in Health Care (2009)

Έτος	Συγγραφείς	Είδος Μονάδας Νοσηλείας	Σημαντικά αποτελέσματα	Διάρκεια follow-up
1977	Casewell & Phillips <sup>121</sup>	Adult ICU	Significant reduction in the percentage of patients colonized or infected by <i>Klebsiella</i> spp.	2 years
1989	Conly et al. <sup>663</sup>	Adult ICU	Significant reduction in HCAI rates immediately after hand hygiene promotion (from 33% to 12% and from 33% to 10%, after two intervention periods 4 years apart, respectively)	6 years
1990	Simmons et al. <sup>667</sup>	Adult ICU	No impact on HCAI rates (no statistically significant improvement of hand hygiene adherence)	11 months
1992	Doebbeling et al. <sup>659</sup>	Adult ICUs	Significant difference between rates of HCAI using two different hand hygiene agents	8 months
1994	Webster et al. <sup>181</sup>	NICU	Elimination of MRSA, when combined with multiple other infection control measures. Reduction of vancomycin use. Significant reduction of nosocomial bacteremia (from 2.6% to 1.1%) using triclosan compared to chlorhexidine for handwashing	9 months
1995	Zafar et al. <sup>182</sup>	Newborn nursery	Control of a MRSA outbreak using a triclosan preparation for handwashing, in addition to other infection control measures	3.5 years
2000	Larson et al. <sup>713</sup>	MICU/NICU	Significant (85%) relative reduction of VRE rate in the intervention hospital; statistically insignificant (44%) relative reduction in control hospital; no significant change in MRSA	8 months
2000	Pittet et al. <sup>60,61</sup>	Hospitalwide	Significant reduction in the annual overall prevalence of health care-associated infections (42%) and MRSA cross-transmission rates (87%). Active surveillance cultures and contact precautions were implemented during same time period. A follow-up study showed continuous increase in handrub use, stable HCAI rates and cost savings derived from the strategy.	8 years
2003	Hilburn et al. <sup>645</sup>	Orthopaedic surgical unit	36% decrease of urinary tract infection and SSI rates (from 8.2% to 5.3%)	10 months

2004	MacDonald et al. <sup>489</sup>	Hospitalwide	Significant reduction in hospital-acquired MRSA cases (from 1.9% to 0.9%)	1 year
2004	Swoboda et al. <sup>852</sup>	Adult intermediate care unit	Reduction in HCAI rates (not statistically significant)	2.5 months
2004	Lam et al. <sup>648</sup>	NICU	Reduction (not statistically significant) in HCAI rates (from 11.3/1000 patient-days to 6.2/1000 patient-days)	6 months
2004	Won et al. <sup>714</sup>	NICU	Significant reduction in HCAI rates (from 15.1/1000 patient-days to 10.7/1000 patient-days), in particular of respiratory infections	2 years
2005	Zerr et al. <sup>715</sup>	Hospitalwide	Significant reduction in hospital-associated rotavirus infections	4 years
2005	Rosenthal et al. <sup>716</sup>	Adult ICUs	Significant reduction in HCAI rates (from 47.5/1000 patient-days to 27.9/1000 patient-days)	21 months
2005	Johnson et al. <sup>494</sup>	Hospitalwide	Significant reduction (57%) in MRSA bacteraemia	36 months
2007	Thi Anh Thu et al. <sup>717</sup>	Neurosurgery	Reduction (54%, NS) of overall incidence of SSI. Significant reduction (100%) of superficial SSI; significantly lower SSI incidence in intervention ward compared with control ward	2 years
2007	Pessoa-Silva et al. <sup>657</sup>	Neonatal unit	Reduction of overall HCAI rates (from 11 to 8.2 infections per 1000 patient-days) and 60% decrease of risk of HCAI in very low birth weight neonates (from 15.5 to 8.8 episodes/1000 patient-days)	27 months
2008	Rupp et al. <sup>707</sup>	ICU	No impact on device-associated infection and infections due to multidrug-resistant pathogens	2 years
2008	Grayson et al. <sup>719</sup>	1)6 pilot hospitals 2)all public hospitals in Victoria (Australia)	1)Significant reduction of MRSA bacteraemia (from 0.05/100 patientdischarges to 0.02/100 patient-discharges per month) and of clinical MRSA isolates 2)Significant reduction of MRSA bacteraemia (from 0.03/100 patient-discharges to 0.01/100 patient-discharges per month) and of clinical MRSA isolates	1) 2 years 2)1 year

ICU: intensive care unit; NICU: neonatal ICU; MRSA: methicillin-resistant *S aureus*; VRE: vancomycin-resistant *Enterococcus* spp;  
MICU: medical ICU; HCAI: health care-associated infection; SSI: surgical site infection; NS: not significant.

Source: adapted from Pittet, 2006<sup>885</sup> with permission from Els