Background/Objectives: Clostridium difficile-associated diarrhea (CDAD) is emerging as a major nosocomial threat worldwide. The incidence of CDAD has increased as well as severity and mortality. In early 2005, at an orthopedic specialty hospital, there was a noticeable increase in the number of Clostridium difficile positive titers identified. From January through April 2005 there were 28 cases of CDAD identified and 13 (46%) occurred in patients who had been hospitalized for greater than 72 hours. From May 2005 through December 2006 there were 78 cases of CDAD and only 19 occurred after 72 hrs of hospitalization (24%). This represents a 48% reduction since control measures were implemented.

Conclusions: When symptoms subsided and treatment was completed the patient was moved to another room so terminal disinfection could be completed. Assured healthcare staff updates and implementation of control measures was essential in reducing the number of possible healthcare-associated infections with Clostridium difficile. Rapid response to surveillance data and the use of a team approach was successful in reducing the number of possible healthcare-associated infections with Clostridium difficile.

References: