

CDC PREVENTION EPICENTERS PROGRAM

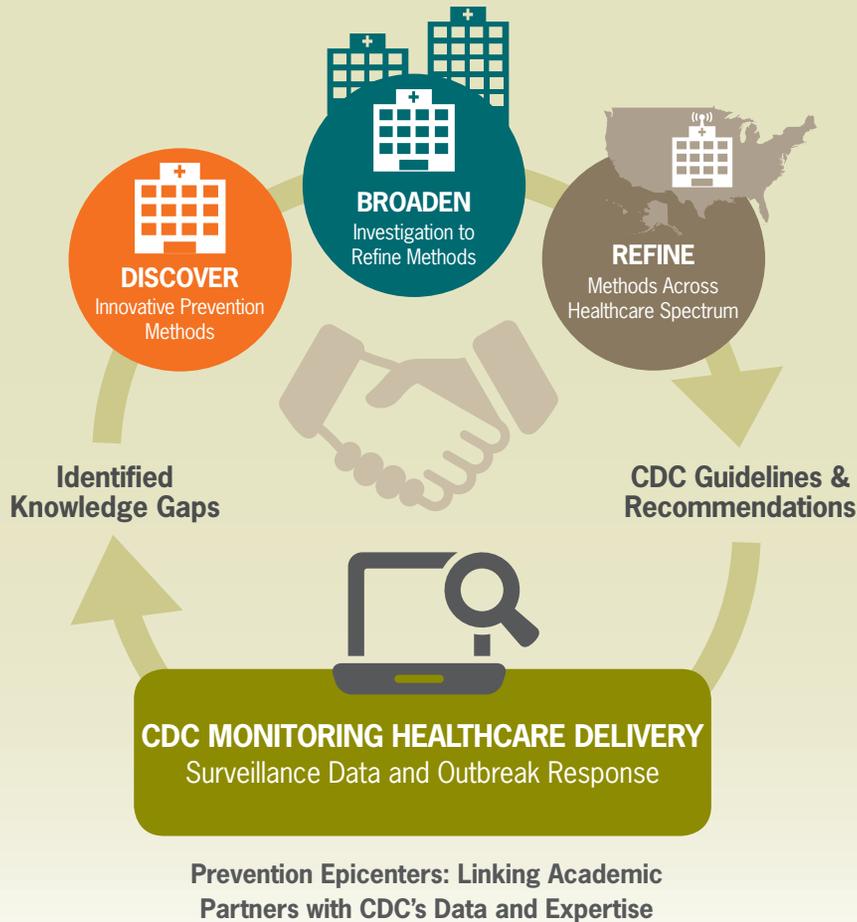
DISCOVERING NEW WAYS TO PROTECT PATIENTS



What is a Prevention Epicenter? A unique research program in which CDC collaborates with academic investigators to conduct innovative infection control and prevention research.

Innovations to Improve Patient Safety

CDC guides and collaborates with Prevention Epicenters to protect patients by filling prevention knowledge gaps identified by CDC's outbreak response and surveillance data.



Estimated Prevention Epicenters National Reach

333

healthcare facilities

2.6 million

hospital admissions

1.5 million

unique patients per year



<http://www.cdc.gov/hai/epicenters>

National Center for Emerging and Zoonotic Infectious Diseases
Division of Healthcare Quality Promotion (DHQP)



PREVENTION EPICENTERS AT WORK

CHALLENGE



EPICENTER STUDY



IMPACT

REDUCE MRSA



Methicillin-resistant *Staphylococcus aureus* (MRSA) is an important cause of healthcare-associated infections. Preliminary research suggested that certain bathing practices might prevent MRSA infection.



Tested the effectiveness of bathing with antiseptic soap and treating the inside of the nose with an antibiotic ointment to prevent MRSA among intensive care unit (ICU) patients.

40%

Treating all ICU patients with antiseptic soap and antibiotic ointment is more effective than standard prevention strategies, reducing MRSA risk by nearly 40%.

Hospitals are implementing this novel strategy to improve MRSA prevention among ICU patients.

CRE Transmission



Drug-resistant infections, such as those caused by carbapenem-resistant Enterobacteriaceae (CRE), are on the rise, and some are untreatable with antibiotics.



Tested the effectiveness of a CRE prevention package to stop the spread of CRE in a group of long term acute care facilities.

56%

The prevention package led to a 56% reduction in CRE bloodstream infections.

Protecting Patients on Ventilators



Tools are needed to accurately measure the impact of prevention efforts to protect patients on ventilators from adverse events such as pneumonia.



Tested the effectiveness of a strategy to get patients off ventilators sooner to speed up their recovery, and a new way to track improvement in care of patients on ventilators.



Patients recovered faster, reducing the time it took to get patients off ventilators and out of ICUs.

This new way to track improvements in ventilator care is now part of CDC's National Healthcare Safety Network (NHSN) and available to all U.S. hospitals.

For more information please visit <http://www.cdc.gov/hai>