Hand Hygiene In Hospitals Has Gone Too Far

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We've run amok with wearing gloves in the hospital. And by "we" I mean every healthcare worker in sight. I see people putting on gloves before they'll give a patient a clean warm blanket. This is not only ridiculous, it's actually harmful. Here's why.

We learned the hard way in the 1980s, during the early days of the AIDS epidemic, that the HIV virus and other potentially lethal microorganisms are carried in blood and body fluids. The Centers for Disease Control and the World Health Organization developed the concept of "universal precautions", which applies during all patient-care activities that may involve exposure to blood, body fluids, mucous membranes and non-intact skin. Observing "universal precautions" means that you always wear gloves in those situations because you may not know ahead of time if a patient carries HIV, hepatitis, or any other infectious disease. You don't want to get infected yourself, or inadvertently infect another patient.

But when did "universal precautions" come to mean that you have to wear gloves before you touch your patient at all?

The downside of hand hygiene campaigns is that they discourage us from normal human contact with our patients. If you're worried that the hand hygiene police will detect a deviation from protocol and report you to your hospital's infectious disease authorities, there's an easy way to avoid the problem. Steer clear of the patient. And with the advent of the ubiquitous electronic health record, doctors and nurses are under tremendous time pressure to complete all the required data entry fields and move patients through the system. When you think about it, not touching the patient saves time that could be more efficiently spent at the computer keyboard. There's a win-win situation, you might think. But is it really?

There's an old adage most of us heard in medical school: "When all else fails, examine the patient." What this means is that all the tests, scans, monitoring equipment, and every other marvelous technology at our disposal can't replace a skilled and experienced physician taking a history and examining the patient. If you can't figure out what's going wrong, go back and examine the patient again. It's still good advice.

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