Medical News

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CDC Revising Guidelines for Preventing Nosocomial Infections

The Hospitals Infection Control Practices Advisory Committee (HICPAC) has begun to revise the CDC's Guidelines for Preventing Nosocomial Infections, originally published in the early 1980s. The Guidelines for Preventing Nosocomial Pneumonia was selected as the first to be revised. The new guideline will be broadened to include viral, fungal, and Legionella pneumonias. The next five guidelines selected for revision or development are on Isolation Precautions in Hospitals, Prevention and Control of Intravascular Infections, Infection Control in Personnel Health, Appropriate Use of Antimicrobials, and Prevention of Surgical Wound Infection.

The 12-member HICPAC was established in 1991 by former Secretary of the Department of Health and Human Services, Dr. Louis Sullivan. HICPAC was charged to provide advice and guidance to the CDC regarding the practice of hospital infection control and strategies for surveillance, prevention, and control of nosocomial infections in U.S. hospitals. Dr. Walter Hierholzer of Yale New Haven Hospital currently chairs the committee, and Julia Garner of the CDC serves as executive secretary. Meetings are held twice yearly at the CDC, and notices of the meetings are published in the *Federal Register* prior to the meeting. The next meeting is scheduled for June 21-23, 1993.

Product Variance Reported with TB Skin Testing Materials

A cluster of tuberculin skin test (TST) conversions in an administrative nonpatient care department prompted an investigation by the Shands Hospital at the University of Florida. The 12% skin test conversion rate among employees of this department (16 TST positive of 134 tested) was higher than the overall hospital TST conversion rate of 8% (245 of 2,721 employees). The product used for TST was Aplisol (Parke Davis). After an unremarkable investigation to identify active cases and sources of possible exposures, an evaluation of the tuberculin skin test product was initiated.

Previously known positive individuals were retested with the product Tubersol (Connaught). Of the 159 known positive employees, 108 (68%) retested negative.

The results of this investigation were presented at the Annual meeting of the Society for Hospital Epidemiology of America in Chicago, April 18-20, 1993, by Loretta Fauerback et al from the Shands Hospital at the University of Florida. Several members of the audience shared similar discordant results between the two products, including Trisha Barrett from Alta Bates Medical Center in Berkeley, California. The results of these investigations have been reported to the FDA. Attendees expressed concern regarding the serious implications of the disparity in results from the two products.

New York City Adopts Rule Allowing Detention of TB Patients Unwilling to Take Medicine

New York City adopted a set of procedures that lay out the conditions under which the city health commission can order detention and other compulsory measures to address a public health threat posed by a confirmed or suspected case of tuberculosis. These procedures were adopted by New York City Board of Health on March 9, 1993 in-an amendment to Section 11.47 of the city Health Code. Under these rules, the city health commissioner is authorized to order physical examinations of people having or suspected of having active TB and completion of

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