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Many common tactics don't actually work

Disinfecting showerheads doesn't prevent Legionnaires'

by Sandra Yin (syin@decisionhealth.com)

Put your scrub brushes away and don't worry about cranking up your hot water tanks to 140° F. There's no need to waste time and money removing and disinfecting showerheads and aerators to fight Legionnaires' disease, says a leading Legionnaires' expert.

These are among many practices commonly used to fight *Legionella* bacteria, which causes Legionnaires' disease, but they don't reflect the latest evidence-based research, says Janet Stout, director of the Special Pathogens Laboratory in Pittsburgh, who has helped developed Legionnaires' detection and prevention strategies.

Why you should take a closer look: Legionnaires' disease is among the nine hospital-acquired conditions CMS wants to add to its do-not-pay list starting Oct. 1, 2008 [IJC 4/28/08].

Routine water system maintenance is another practice not supported by research, Stout says. Instead, target the source – hospital drinking water. About 60 percent of hospitals contain *Legionella* bacteria in their drinking water, she says.

Stout offers up proven strategies that are effective at preventing and controlling *Legionella*:

✓ **Use *Legionella* diagnostic tests often.** Consider using the urinary antigen test. If the disease goes unnoticed, the pneumonia will worsen and the patient may die. *Legionella* diagnostic tests should be available in-house for rapid use by physicians.

Most hospitals do not have such tests on site because finance managers don't always support the purchase, she says. But if the tests aren't available in-house, it may take from two to seven days to get results from an outside lab and a doctor may have to resort to a best-guess diagnosis and treatment.

If the doctor doesn't choose the right antimicrobial, the patient may deteriorate rapidly with Acute Respiratory Distress Syndrome.

"You really want the right therapy started early," Stout says. "The window of opportunity (48 hours) is critical."

✓ **Once you've identified a problem, prevent it with environmental controls.** Systems that add metals (copper and silver) or chemicals (chlorine dioxide) that kill *Legionella* or point-of-use filters have successfully been used to disinfect hospital water, she says.

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A few tactics that *aren't* proven effective

Beware of some common measures that haven't been validated as effective ways to prevent *Legionella* in your drinking water system:

- **Removing and disinfecting showerheads and aerators.** Studies have found that descaling, disinfection and/or replacement of faucets and showerheads does not minimize *Legionella* colonization in hospitals.
- **Shower restrictions.** Patients who are well enough to shower usually aren't the ones most vulnerable to *Legionella*.
- **Routine maintenance of hospital water systems.** Studies refute the assumption that routine maintenance programs for plumbing systems are important for minimizing *Legionella* colonization, she says.
- **Maintaining a hot water storage temperature of 140° F.** While many guidelines recommend that hot water tanks be set to 140° F and the circulating hot water temperature be set to 124° F, one study showed that sites remained heavily colonized despite higher recirculation temperatures (140° F<).

In a Swedish hospital, *Legionella* colonization was reduced after it raised the temperatures even higher, to 149° F at the tank and to 133° F – 142° F at the outlets. But many state regulations prohibit such high water tank temperatures in hospitals.

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