



Press Release

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Progress Being Made in Infection Control in U.S. Hospitals; Continued Improvements Needed

CDC report provides first snapshot of state efforts to prevent MRSA and deadly diarrheal infections

Progress has been made in the effort to eliminate infections that commonly threaten hospital patients, including a 46 percent decrease in central line-associated bloodstream infections (CLABSI) between 2008 and 2013, according to a report released today by the Centers for Disease Control and Prevention. However, additional work is needed to continue to improve patient safety. CDC's Healthcare-Associated Infections (HAI) progress report is a snapshot of how each state and the country are doing in eliminating six infection types that hospitals are required to report to CDC. For the first time, this year's HAI progress report includes state-specific data about hospital lab-identified methicillin-resistant *Staphylococcus aureus* (MRSA) bloodstream infections and *Clostridium difficile* (*C. difficile*) infections (deadly diarrhea).

The annual [National and State Healthcare-associated Infection Progress Report](#) expands upon and provides an update to previous reports detailing progress toward the goal of eliminating HAIs. The report summarizes data submitted to CDC's [National Healthcare Safety Network](#) (NHSN), the nation's healthcare-associated infection tracking system, which is used by more than 14,500 health care facilities across all 50 states, Washington, D.C., and Puerto Rico. Healthcare-associated infections are a major, yet often preventable, threat to patient safety. On any given day, approximately one in 25 U.S. patients has at least one infection contracted during the course of their hospital care, demonstrating the need for improved infection control in U.S. healthcare facilities.

"Hospitals have made real progress to reduce some types of healthcare-associated infections - it can be done," said CDC Director Tom Frieden, M.D., M.P.H. "The key is for every hospital to have rigorous infection control programs to protect patients and healthcare workers, and for health care facilities and others to work together to reduce the many types of infections that haven't decreased enough."

This report focuses on national and state progress in reducing infections occurring within acute care hospitals. Although not covered by the report released today, the majority of *C. difficile* infections and MRSA infections develop in the community or are diagnosed in healthcare settings other than hospitals. Other recent reports on infections caused by germs such as MRSA and *C. difficile* suggest that infections in hospitalized patients only account for about one-third of all the healthcare-associated infections.

Tracking National Progress

On the national level, the report found a:

- 46 percent decrease in central line-associated bloodstream infections (CLABSI) between 2008 and 2013. A central line-associated bloodstream infection occurs when a tube is placed in a large vein and either not put in



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correctly or not kept clean, becoming a highway for germs to enter the body and cause deadly infections in the blood.

- 19 percent decrease in surgical site infections (SSI) related to the 10 select procedures tracked in the report between 2008 and 2013. When germs get into the surgical wound, patients can get a surgical site infection involving the skin, organs, or implanted material.
- 6 percent increase in catheter-associated urinary tract infections (CAUTI) since 2009; although initial data from 2014 seem to indicate that these infections have started to decrease. When a urinary catheter is either not put in correctly, not kept clean, or left in a patient for too long, germs can travel through the catheter and infect the bladder and kidneys.
- 8 percent decrease in MRSA bloodstream infections between 2011 and 2013.
- 10 percent decrease in *C. difficile* infections between 2011 and 2013.

Research shows that when healthcare facilities, care teams, and individual doctors and nurses, are aware of infection control problems and take specific steps to prevent them, rates of targeted HAIs can decrease dramatically.

Data for Local Action

The report provides data that can be used by hospitals to target improvements in patient safety in their facilities. For example, together with professional partners, CDC, the [Centers for Medicare & Medicaid Services \(CMS\) Quality Improvement Organizations](#) and [Partnership for Patients](#) initiative, and the [Agency for Healthcare Research and Quality's \(AHRQ\) Comprehensive Unit-based Safety Program \(CUSP\)](#) increased attention to the prevention of catheter-associated urinary tract infections, resulting in a reversal of the recent increase seen in these infections. CAUTI data for early 2014 demonstrating these improvements will be publicly available on the CMS [Hospital Compare](#) website in 2015. CDC is also working to use HAI data to help identify specific hospitals and wards that can benefit from additional infection control expertise.

“Healthcare-associated infection data give healthcare facilities and public health agencies knowledge to design, implement and evaluate HAI prevention efforts,” said Patrick Conway, Deputy Administrator for Innovation and Quality and Chief Medical Officer of the Center for Medicare & Medicaid Services. “Medicare’s quality measurement reporting requires hospitals to share this information with the CDC, demonstrating that, together, we can dramatically improve the safety and quality of care for patients.”

“Successful programs such as CUSP demonstrate that combining sound HAI data with effective interventions to prevent these infections can have enormous impact,” said AHRQ Director Richard Kronick, Ph.D.

State Data

Not all states reported or had enough data to calculate valid infection information on every infection in this report. The number of infections reported was compared to a national baseline.

In the report, among 50 states, Washington, D.C., and Puerto Rico, 26 states performed better than the nation on at least two of the six infection types tracked by state (CLABSI, CAUTI, MRSA, *C. difficile*, and SSI after colon surgery and abdominal hysterectomy). Sixteen states performed better than the nation on three or more



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infections, including six states performing better on four infections. In addition, 19 states performed worse than the nation on two infections, with eight states performing worse on at least three infections.

The national baseline will be reset at the end of 2015. Starting in 2016, HAI prevention progress from 2016-2020 will be measured in comparison to infection data from 2015.

The federal government considers elimination of healthcare-associated infections a top priority and has a number of ongoing efforts to protect patients and improve healthcare quality. CDC provides expertise and leadership in publishing evidence-based infection prevention guidelines, housing the nation's [healthcare-associated infection](#) laboratories, responding to health care facility outbreaks, and tracking infections in these facilities. Other federal and non-federal partners are actively working to accelerate the ongoing prevention progress across the country. In collaboration with CDC, these agencies use data and expertise to mount effective prevention programs and guide their work, including efforts of CMS [Quality Improvement Organizations](#), the [Agency for Healthcare Research and Quality's Comprehensive Unit-based Safety Program](#), and the [National Action Plan to Prevent Healthcare-Associated Infections: Road Map to Elimination](#).

Preventing infections in the first place means that patients will not need antibiotics to treat those infections. This can help to slow the rise of antibiotic resistance and avoid patient harm from unnecessary side-effects and *C. difficile* infections, which are associated with antibiotic use. Continued progress and expanded efforts to prevent HAIs will support the response to the threat of antibiotic resistance.

To access the report and to see updated healthcare-associated infection data, see CDC's website: www.cdc.gov/hai.

For more information on national goals for reducing healthcare associated infections, see the [Healthy People 2020](#) objectives for HAIs: <http://www.healthypeople.gov/2020/topics-objectives/topic/healthcare-associated-infections>.

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