

Choosing Wisely[®]

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Preventing infections in the hospital

Watch out for these two practices

If you or someone you care for is in the hospital, there are two common medical practices that you should watch out for. Here's why:

Both urinary catheters and ulcer drugs are over-used in hospitals. And both increase the risk of infection.

The risks of urinary catheters.

Catheters are tubes to drain urine. They are usually used after surgery, or to keep track of how much urine you make.

But catheters aren't always necessary. They are often used for the convenience of staff. And they are often left in too long.

The longer a catheter is in place, the more bacteria can grow. This can cause a urinary tract infection, or UTI. UTIs are the most common infection that people get in hospitals in the U.S.—there are over a million cases a year. UTIs can lead to longer hospital stays and prescriptions for antibiotics. Sometimes the infections go to the bloodstream and cause death. They kill about 13,000 Americans each year.



The risks of ulcer drugs.

Many hospital patients are given drugs to help prevent ulcers and gastrointestinal bleeding. If someone has had these problems, the drugs may be helpful. They can also help people in intensive care, especially if they are on ventilators.

The two drugs are:

- Proton-pump inhibitors such as propranolol (Prilosec) and esomeprazole (Nexium).
- Histamine H2 receptor antagonists such as ranitidine (Zantac) and famotidine (Pepcid).

However, too many patients are given these drugs—nearly three in four. And many are wrongly sent home with prescriptions for the drugs. They may keep taking them for weeks or months.

The drugs kill off healthy bacteria in the gut. People taking these drugs are twice as likely to get a harmful infection called C. diff (short for Clostridium difficile). It causes severe diarrhea and is hard to treat with antibiotics. People taking the drugs are also more likely to get pneumonia.

Risky practices can cost a lot.

- They add to hospital costs.
- Half of hospital patients who wrongly take ulcer drugs in the hospital go home with prescriptions—which cost on average \$500 per year.
- Each year, catheter-related urinary tract infections add about \$500 million to the national health care bill.

Ask about safer options.

Each day that you or someone you care about is in the hospital, ask the nurses and physicians if a catheter in place is still needed. The risk of infection rises greatly if a catheter is in for more than two days. There are other ways to measure urine. And adult pads can be used for bladder control problems. For males, a “condom catheter,” fitted outside the penis, is a good option.

If you or your loved one is taking acid-suppressing medication, ask if the patient has a high risk for a stress ulcer.

This report is for you to use when talking with your health-care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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Advice from Consumer Reports

Other ways to stay safe in the hospital

Check on your hospital. One patient in 20 gets an infection in the hospital. You can check on the hospitals in your area at www.ConsumerReports.org/hospitalratings.

Bring help. Ask a friend or family member to spend a lot of time with you in the hospital. They can help you ask questions, take notes about answers and keep a watchful eye.

Insist on clean hands. This is probably the most important step hospital staff can take to prevent infections. Studies suggest that many doctors and nurses overlook it. If you haven't seen staff wash their hands with soap and water or use hand sanitizer, ask them to do so. Visitors should also do this.

Ask if your surgery site needs to be shaved. Infections can start in the small cuts.

Speak up. If you are not sure why something is happening to you or your loved one, ask about it. If you feel uncomfortable or something seems wrong, speak up. When it comes to hospital care, there are no bad questions.

