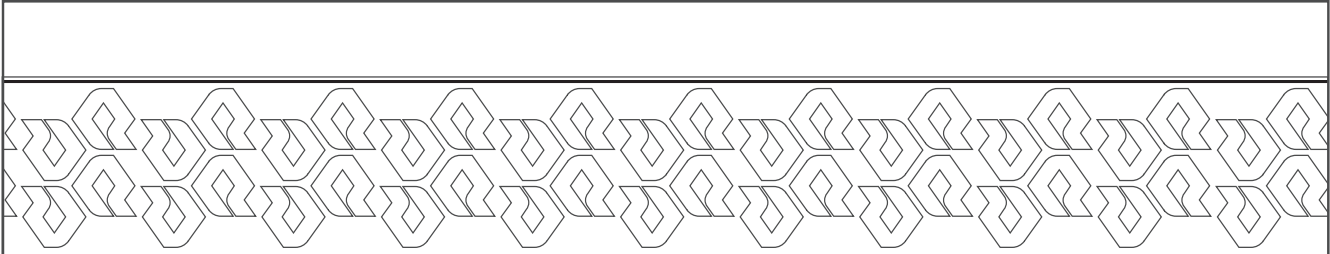


Chapter 9: Frequently asked questions



9. Frequently asked questions

Q: When should hands not be decontaminated with an alcohol-chlorhexidine hand rub?

A: If hands are visibly dirty, visibly soiled with blood or other body fluids, or contaminated with proteinaceous material, hand wash with plain or anti microbial soap. The same is advised following known or suspected exposure to *Clostridium Difficile*. Washing the hands with soap and water is preferred because it is the best method of physically removing spores from the hands. Alcohols, chlorhexidine, iodophors and other antiseptic agents have shown poor activity against spores.

Q: What are the advantages of alcohol-chlorhexidine hand rub over alcohol rub?

A: The addition of chlorhexidine to alcohol demonstrates persistent effect for at least three hours after application. Alcohol on its own stops working once your hands are dry. There are only two published studies demonstrating a decrease in nosocomial infections with the introduction of a hand hygiene product. The product used in both these studies was an alcohol-chlorhexidine hand rub.^{1, 4}

Q: Why have rubs and not gels been recommended?

A: Laboratory studies have found that alcohol-based hand rubs reduce bacterial counts on the hands of volunteers to a greater degree than similar hand gels tested.⁷ It takes longer for the alcohol in a gel to get onto your skin. Gels do not dry in 15 seconds, so hand hygiene takes longer than with a rub. Also, gels leave a 'sticky' residue and HCWs often wash their hands after four or five uses.

Q: Why do my hands sting when I apply an alcohol-chlorhexidine product?

A: Stinging demonstrates pre-damaged epidermal tissue, most commonly caused by the frequent use of soap and water. The use of an alcohol-chlorhexidine hand rub may lead to an improvement in the condition of your hands because it contains an emollient, does not remove skin lipids and does not require a paper towel for drying. However, if symptoms persist, medical opinion should be sought.

Q: Will it matter if my hands are wet when I apply the alcohol-chlorhexidine hand rub?

A: Yes, having wet hands dilutes the solution thus decreasing its effectiveness. The product must be applied to dry hands.

Q: Can I bring in my own moisturising cream from home?

A: No, many hand creams inactivate chlorhexidine. The products used by your hospital have been chosen for their compatibility with chlorhexidine.

Q: Why do I have to decontaminate my hands after removing gloves? I thought the gloves stopped 'bugs' getting on my hands?

A: The use of gloves does not replace the need for hand decontamination. Gloves will decrease the number of 'bugs' you acquire on your hands, but will not totally prevent them.

Q: Can I wear artificial fingernails or extenders when having direct contact with patients?

A: HCWs with these type of nails are more likely than those with natural nails to harbour gram-negative pathogens on their fingertips. CDC guidelines strongly advise against wearing artificial fingernails when having direct contact with patients.

