The Sceptic presents

The case for... and against...

Infection Control

A dreadful case was heard at the GDC recently which should result in a dentist being removed from the register. The dentist in question had some very strange habits indeed. He didn’t use latex or non-latex gloves, all the better to be able to clean his nails and ears with instruments he was about to use (one would hope he used different instruments for each purpose, as using the same would be very unhygienic indeed). Oh, and he also urinated in the surgery basin, but presumably he ran water afterwards. His nurse and a patient ratted on him. Can’t think why, but dental patients, not to mention the GDC, are very concerned about infection control, and he was duly signed to the scrapheap where presumably he can indulge more weird and weirder perversions.

So should health-care professionals be more concerned with infection control, and health and safety issues. If so, which? Here is a list of issues, by no means comprehensive, about which we need to be concerned:
- Needle stick injuries
- Hand-piece sterilisation
- Medicolegal factors

Collective cost is, especially if one is allergic to latex.

1. If you are seeing, say, 15 patients a day, you are using a minimum of 15 pairs of latex/non-latex gloves, probably double that number daily. The individual cost/item is not high, but the

Infection Control

The 10th Dimension

OCD Freakary

Control freaks display variations of OCD – from being obsessive about crisp crumbs to dominating your every move. But beware, they are rarely NICE warns Ed Bonner

A bit of benchmarking: how do you rate against the following criteria? (write down ‘a’ for ‘always’, ‘c’ for ‘sometimes’, and ‘n’ for ‘never’):

1. When travelling abroad, you like to get to the airport early.
2. When packing for a holiday, you check the contents and weight of each family member’s cases.
3. Immediately after you finish a meal at home, you pack the dishwasher.
4. You are the first to arrive at work and the last to leave.
5. You deal with your new emails before you begin to see patients.
6. You write all your own clinical notes yourself.
7. You order all your own material on credit when you will not run out of stock.

8. You write very detailed notes to the laboratory, because they will get it wrong if you don’t.
9. You don’t leave work till you have cleared your desk.
10. At staff meetings, you make detailed notes of everything that is said.

Aiting the results

It is obvious that if your ‘a’s predominate, it is very important for you that you are in control of every aspect of your life. In fact you are out of control.

Those who have ticked mainly ‘c’s, are more laid back but still in control, able to relinquish it when possible or necessary, and are generally good team players or leaders.

If you have separated ‘clean’ and ‘dirty’ areas, and are furnished to keep everything sterilised, but unwrapped instruments in a drawer in your surgery where they are susceptible to aerosol spray?

What about the water we use? How sterile is it?

How much time has to be spent on clinical decontamination/sterilisation procedures, and at what cost in terms of essential resources like electricity and human labour?

Where do you stand from a medico-legal perspective if we are unable to show documented proof of compliance with recommended infection control protocol? (The answer? In front of the GDC.)

To sum up, the case against sterilisation rests on three factors: cost, time and efficacy.

The case for... sterilisation

The case for is much simpler and more persuasive: we have no choice. The creation of the Healthcare Commission whose influence is felt by the dental profession, is the first major group to have the power to sanction practices that are non-compliant.

Without a doubt, two of the biggest concerns are the rising incidence and risk of HIV and hepatitis, and the biggest areas of concern are aerosol infection and waterborne contamination and needlestick injury. The good news is that companies such as SciCam, are addressing many of these issues.

Its Hydrim washer/disinfector has the capability of perfectly prepping instruments for sterilisation, and the very compact Statim steriliser can sterilise handpieces in just eight minutes. Henry Schein is marketing the ‘Safe-point’ to mitigate the dangers of needle-stick injury by facilitating quick and safe needle removal (without re-sharpening) and disposal at the point of use.

Do you have any comments about sterilisation compliance? Email the team at editor@dentaltribune.uk.com and let us have your views.