Effectiveness of the antiseptic barrier cap on rate of bloodstream infections

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON26906

Source
NTR

Brief title
Barriercap

Health condition

sepsis, central line associated bloodstream infection, infants, children, intensive care

Sponsors and support

Primary sponsor: Erasmus MC-Sophia, Department of Paediatrics, Division of Neonatology
Source(s) of monetary or material Support: None

Intervention

Outcome measures

Primary outcome

Rate of CLABSI per 1.000 central line days

Secondary outcome

- Compliance of the Healthcare workers who use the antiseptic barrier cap.

- Incidence of bloodstream infections

- Costs

Study description

Background summary

Bloodstream infections and central line associated bloodstream infections (CLABSIs) are a commonly encountered complication in hospitalized infants and result in increased length of stay, cost, morbidity and mortality. Healthcare workers often do not apply an appropriate heb desinfection. The antiseptic barrier cap is developed to improve disinfection procedures. This observational study evaluate the incidence of bloodstream infections and the rate of central line associated bloodstream infections in infants and children addmitted to a neonatal and pediatric intensive care. Adherence to the barrier protocol will be measured.

Study objective

The antiseptic barrier cap reduce the incidence of bloodstream infections and the rate of central line associated bloodstream infection (CLABSI) per 1.000 central line days among infants admitted on the neonatal intensive care unit and the paediatric intensive care unit.

Study design

preintervention: 24 months

intervention: 12 months

Intervention

An antiseptic barrier cap will be investigated in a NICU and PICU setting, which is developed to improve disinfection procedures and helps to prevent bloodstream infections and CLABSIs by optimizing hub disinfection through cleaning of the catheter hub without active scrubbing.

Contacts

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Eligibility criteria

Inclusion criteria

All infants admitted to the Neonatal Intensive Care Unit with peripheral catheter, tunneled and non-tunneled central venous catheters, and/or umbilical catheters.

Pediatric Intensive Care Unit all children with a tunneled and non-tunneled central venous catheters, and/or umbilical catheters and combined with a periferal catheter.

Exclusion criteria

NA

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-05-2016

Enrollment:	1700
Type:	Anticipated

Ethics review

Positive opinion

Date:	20-04-2016
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL5689
NTR-old	NTR5833
Other	Erasmus MC-Sophia : MEC-2016-061

Study results

Summary results
planned