ENDOSCOPE DECONTAMINATION

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INFECTION CONTROL OBJECTIVE

To prevent potentially pathogenic microorganisms from reaching a susceptible site on a patient in sufficient numbers to cause infection

ENDOSCOPE DECONTAMINATION WHY?

- To prevent infection
- To protect the quality of diagnostic samples
- To prolong the life of the equipment

STERILIZATION

The complete destruction or removal of all micro- organisms including bacterial spores

DISINFECTION

The destruction of micro-organisms but not usually bacterial spores. The process does not necessarily kill all micro-organisms but reduces them to a level which is not harmful to health

CATEGORIES OF INFECTION RISK TO PATIENTS TREATMENT OF EQUIPMENT

HIGH RISK

Items in close contact with break in the skin or mucous membranes or introduced into a sterile body cavity

STERILIZATION REQUIRED

INTERMEDIATE RISK

Items in contact with intact mucous membranes DISINFECTION (OR STERILIZATION) REQUIRED

SOURCES OF INFECTION DURING ENDOSCOPY

- Previous patient, inadequate decontamination of endoscope before reuse
- Endogenous skin, mucosal or bowel flora
- Contaminated lubricants, dyes,irrigation fluids, rinse water
- Inadequate decontamination of processing equipment
- Air, hands or gloves of staff

ENDOSCOPE DECONTAMINATION PROBLEMS(1)

- Instruments and accessories are expensive
- Damaged by heat and pressure
- Complex, difficult to clean and dry
- Penetration of channel uncertain
- Disinfectants often toxic, damaging or ineffective

ENDOSCOPE DECONTAMINATION PROBLEMS(2)

- Short periods only available for decontamination
- Automated systems and environmental controls expensive
- Rapidly advancing technology

MEDICAL DEVICES DIRECTIVE

Manufacturers are obliged to provide full details on how to decontaminate the reusable devices they supply. This should include compatibility with heat pressure, moisture, processing chemicals (e.g. detergents, disinfectants) and ultrasonics.

ENDOSCOPE PROCESSING EVALUATION CRITERIA

- Patient safe
- Staff safe
- Equipment safe
- Cost effective
- Practical

ENDOSCOPE PROCESSING

- Specialized procedure
- Trained staff
- Dedicated room fully equipped

GOOD CLEANING IS ESSENTIAL

It removes:-

- ■Potentially infectious micro-organisms
- ■The organic material on which microorganisms thrive
- Soil which protects micro-organisms during sterilization and disinfection
- ■Soil which may inactivate disinfectants



CLEANING OF ENDOSCOPES

Important to ensure

- Access to all channels whether they have been used or not e.g. forceps raiser channel, auxiliary water channel
- Irrigation of all channels that cannot be brushed

MANUAL CLEANING

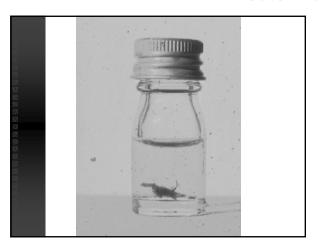
Brushing

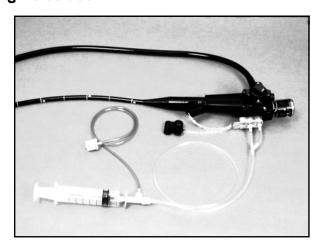
Appropriate size brush

Flushing

All channels









ENDOSCOPE ACCESSORIES Single use v reuseable Cleaning Traceability Cost Turnaround time





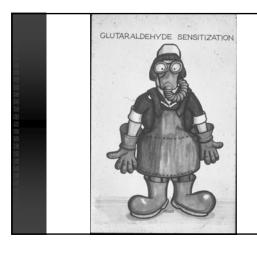
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ENDOSCOPE PROCESSING

- Patient safe
- Staff safe
- Equipment safe
- Cost effective
- Practical

GLUTARALDEHYDE (Cidex, Asep, Totacide)

- ■Wide range of antimicrobial activity
- **■**(including *Mycobacterium tuberculosis*)
- ■Sporicidal (slow)
- ■Inexpensive
- ■Not readily inactivated by organic material
- ■Does not damage instrument or processor components
- ■Irritant and sensitising
- ■Fixative
- ■Relatively unstable



GLUTARALDEHYDE UK MAXIMUM EXPOSURE LIMIT (MEL)

 $0.05 \text{ ppm } (0.2 \text{ mgm}^{-3})$

Short term exposure (15 mins) Long term exposure (8 hour TWA)

SELECTION OF DISINFECTANT FOR HEAT SENSITIVE EQUIPMENT

Efficacy

Destroy pathogenic spores, mycobacteria, non spring bacteria, viruses and fungi

Compatibility

Non damaging to instruments and processors

Safety

Non irritant to patients and staff. Environmentally friendly

Cost

Consider use concentration, stability and associated costs e.g. processors, personal protective equipment

PERACETIC ACID (NuCidex, Steris, Perasafe, Perascope)

- Wide range of antimicrobial activity (including Mycobacterium tuberculosis)
- Rapidly sporicidal
- Less irritant than glutaraldehyde
- Active in presence of organic material
- Damaging to some instrument and processor components
- Unstable
- Unpleasant odour

CHLORINE DIOXIDE (Tristel)

- Wide range of antimicrobial activity (including Mycobacterium tuberculosis)
- Rapidly sporicidal
- ? Less irritant than glutaraldehyde
- Inactivated by organic material
- Damaging to some instrument and processor components
- Unstable
- Unpleasant odour

SUPEROXIDISED WATER

Sterilox

ORP 950mV, pH 5-6.5, Current 9 Amps

- Wide range of antimicrobial activity (including *Mycobacterium tuberculosis*)
- Rapidly sporicidal
- Non irritant
- Generated at point of use
- Unstable (use within 24 hours)
- Inactivated by organic material
- Damaging to some instrument components
- Generator expensive

CIDEX OPA 0.55% ortho-phthalaldehyde

- Wide range of antimicrobial activity (including Mycobacterium tuberculosis)
- No activation required
- Not readily inactivated by organic material
- Does not damage instrument components
- Low vapour properties
- Poor sporicidal properties
- Irritant and sensitising

ALCOHOL

- Rapid in action
- Good bactericidal/fungicidal/virucidal activity
- Evaporates leaving surfaces dry
- Non corrosive
- Non sporicidal
- Flammable
- Fixative, does not penetrate organic material
- Prolonged immersion may damage lens cements

CHANGING YOUR INSTRUMENT DISINFECTANT

- Inform Infection Control Team
- Notify the instrument and processor manufacturers
- Cost change, bearing in mind use life of the disinfectant and any associated equipment
- Ensure manufacturers recommendations are followed
- Establish what PPE is required

ADVANTAGES OF ENDOSCOPE WASHER DISINFECTORS

- Reproducible cycle with process controls
- Reduces splashing and skin contact with the disinfectant
- More user friendly and convenient process

ENDOSCOPE WASHER DISINFECTORS

Effective Cleans and disinfects all internal and

external surfaces

Safe Removes toxic residues and vapour

Versatile Accommodates various types/

manufacturers endoscopes

Convenient Rapid, non damaging, simple to use,

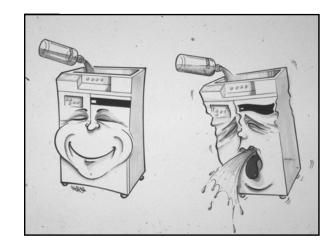
inexpensive

ENDSOCOPE WASHER DISINFECTORS CONSIDERATIONS (1)

- Programmed cycles for cleaning, disinfection and rinsing
- Number of endoscopes processed
- Cycle counter for disinfectant replacement and machine maintenance
- Fault indicator
- Quality of rinse water

ENDSOCOPE WASHER DISINFECTORS CONSIDERATIONS (2)

- Machine self disinfect cycle
- Toxic/irritant fume extraction/containment
- Tracking system for instrument, patient and procedure
- Availability of test reports substantiating claims
- Processor handbook and staff training



MACHINE CONTAMINATION

Due to:-

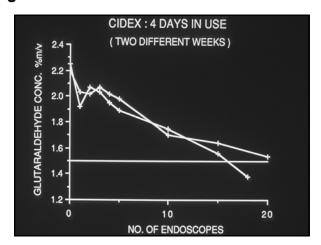
- ■Inadequate cleaning, disinfection and maintenance of machine
- ■Static water remaining in tanks and pipework
- ■Poor quality water supply
- ■Biofilm within the machine

BACTERIA FREE RINSE WATER

- Filtration
- UV Treatment
- Heat treatment
- Reverse osmosis
- Addition of biocides

HTM 2030 MICROBIOLOGICAL QUALITY OF WATER

Total viable count - weekly Environmental mycobacteria - yearly Bacterial endotoxins - yearly



IDENTIFICATION AND TRACING OF ENDOSCOPES

Endoscopes are expensive and if they have to be quarantined as a result of possible exposure to vCJD, and are then subsequently destroyed, there is a large cost attached. If the instrument is not identifiable it may be necessary to destroy the entire endoscopy pool. All endoscopes should have a unique identifier and use on patients and processing details should be recorded.

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SELECTION OF ENDOSCOPE WASHER DISINFECTORS FOR ENDOSCOPES

Ensure that the processor

- Thoroughly cleans all instrument surfaces and lumens
- Disinfects instruments with an effective, non damaging disinfectant at use concentration and temperature
- Removes irritant disinfectant residues with sterile or bacteria free water
- Has a self disinfect facility
- Contains or removes all toxic vapour emissions
- Produces a print out for cycle validation and instrument traceability

VALIDATION OF DECONTAMINATION

Numerous tests are described but at the minimum, the user must ensure :-

- ■All channel irrigation occurs
- ■Disinfectant is within minimum effective concentration
- ■Quality of water is adequate

ENDOSCOPE DECONTAMINATION FAILURES

Due to:

- Inadequate cleaning
- Unsuitable disinfectant
- Damaged instrument
- Contaminated rinse water
- Contaminated washer disinfector

SUMMARY

Effective cleaning and disinfection/ sterilization using a properly validated washer disinfector will

- ■Protect patients and staff from infection
- ■Prolong the life of the equipment
- ■Ensure the quality of the diagnostic/ therapeutic procedure



