

Trasmissione di HIV, HBV o HCV da operatore sanitario infetto a paziente

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KEY WORDS

Healthcare workers; occupational and hospital transmission; outbreak; look back investigation; hepatitis B virus; hepatitis C virus; human immunodeficiency virus

SUMMARY

«HIV, HBV or HCV transmission from infected healthcare workers to patients». **Background:** *The report of transmission of viruses, such as human immunodeficiency virus (HIV), hepatitis B virus (HBV) and hepatitis C virus (HCV), from health care workers (HCWs) to patient has alarmed public opinion with potential repercussions on health organisation.* **Objectives:** *To review available information on cases of transmission of HIV, HBV and HCV from HCW to patient reported worldwide.* **Methods:** *A literature review was conducted with a Medline search of English language full papers, using the following key terms: HIV, HBV, HCV; healthcare workers, occupational and hospital transmission, outbreak, look back investigation. The Medline search was supplemented by a manual search using reference lists of published studies and proceedings of meetings, including some personal communications already reported in a previous review.* **Results:** *Since 1972, 50 outbreaks have been reported in which 48 HBV infected HCWs (39 surgeons) transmitted the infection to approximately 500 persons. To date, 3 cases of transmission of HIV and 8 confirmed cases of transmission of HCV (to a total of 18 patients) from infected healthcare workers to patients have been reported. The factors influencing the transmissibility of infection include: type of procedures performed, surgical techniques used, compliance with infection control precautions, the clinical status and viral burden of the infected HCW and susceptibility of the patient to infection. The risk of transmission of HIV, HBV and HCV from HCWs to patients is associated primarily with certain types of surgical specialties (obstetrics and gynaecology, orthopaedics, cardiothoracic surgery) and surgical procedures that can expose the patient to the blood of the HCW: exposure-prone procedures. Since the early 90's industrialized countries have issued recommendations for preventing transmission of blood-borne pathogens to patients during "exposure prone" invasive procedures. With regard to HBV there is common consent to restricting or excluding HCWs tested HbeAg positive or HBV DNA-positive from performing exposure-prone procedures, while there are still some discrepancies in the different countries for dealing with HCV-infected personnel and in some cases also for those with HIV infection.* **Conclusions:** *Efforts to prevent surgeon-to-patient transmission of blood-borne infections should focus not only on ascertaining the infection status of the HCW but principally on eliminating the cause of blood-borne exposures, for example by the use of blunt suture needles, improved instruments, reinforced gloves, changes in surgical technique and the use of less invasive alternative procedures. These measures should be implemented in order to minimize the risk of blood exposure and consequently of virus transmission both to and from HCW to patients.*

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