

A GUIDE FOR DETERMINING THE MOST EFFECTIVE SKIN CARE PRODUCT FOR THE TASK

With an increase in older Americans, the number of residents in nursing homes continues to increase. With this increase, there are also more employees required for the care of these individuals. In general, older patients also have additional skin care needs. Often, they have skin that is less robust (thinner, weaker, drier), as well as reduced immune system function. In many cases they are bedridden.

This creates a nursing home environment where the ill and elderly patient can be more susceptible to skin breakdown, infection and disease. For the bedridden it can also mean bed sores. The premise is that everything — including proper skin care — should be done to ensure that the care giving organization “does no harm.” It is also important to protect nurses and other care givers.

Effective skin care in nursing homes is very important due to environmental conditions such as frequent hand washing, dry air, patient bathing and cleansing, disposal of incontinent care products and medical waste, and the many medical procedures that occur throughout the facility. Improper skin care can lead to skin breakdown and dermatitis. In addition, improper skin care can result in cross-contamination and nosocomial infection among both the patient and health care giver.

With so many categories of cleansers and skin care products on the market today, how do you determine which cleanser to use for each task? By matching the skin cleanser or care product to the needs of both the resident and health care giver for the particular task or situation.

General Patient Cleansing and Care

Most patients need only to remove light soils from their body and hair. Most of this soil comes from their own body in the form of dead skin cells and oils. Since many also have thin and weak skin, it is important to choose mild cleansers such as plain, non-antimicrobial products for both body and hair cleansing. These products are designed for the removal of transient bacteria from the skin.

Mildness is indicated by low scores on tests such as the Repeat Insult Patch Test or Soap Chamber Test. These products should also be acceptable for appearance, feel and fragrance to both the patients and nursing staff. Tearless products are good alternatives as they are generally mild to the skin as well as non-irritating to the eye.

In addition to choosing a mild cleanser, it is important to provide care in patient drying by using a soft disposable towel in a manner that creates a minimum of abrasion to the skin. A good moisturizing lotion should be applied regularly to help prevent dry skin, which can lead to skin breakdown and more serious problems. When choosing a moisturizing lotion, ask for data that indicates that

the product has been shown to actually moisturize the skin in addition to tests that demonstrate mildness.

Bedridden and Incontinent Patient Care

Bedridden and incontinent residents have special needs, such as removing fecal and urine waste. One of the most effective, quick, and convenient means to perform this task is with pre-moistened wash cloths similar to baby wipes. These products are mild to the skin and very efficient at removing the waste material from the skin.

After cleansing, a good skin protectant product, such as one with a high level of petrolatum, should be applied to protect the skin from the next event. For the bedridden, keeping the perineal area clean on a regular basis is important to help prevent skin breakdown that can lead to bed sores.

All of these products should be acceptable to the staff as well as the patient for appearance, hand feel, and fragrance.

In addition, the facility needs to select products that can be dispensed through either individual containers or refill systems that meet the criteria listed in the adjacent sidebar article.

Nursing Staff Hand Care

Hand washing has been called one of the most important ways to reduce the spread of infectious disease from one person to another or from one site to another on the same patient. It should also be done after using the restroom, after blowing or wiping the nose, and before and after putting on gloves, after contact with any surface that is likely to be contaminated with harmful microorganisms, after handling medical waste, after handling garbage, changing an incontinence pad, or any other task that might leave hands soiled. According to APIC guidelines, complete and thorough hand washing with a plain non-antimicrobial skin cleanser should be done when coming on duty, before and after each resident contact and before and after eating.

High Risk Patient Situations

High risk situations involve tasks such as invasive procedures, contact with residents who have invasive devices, leaving an isolation area, care for severely immunocompromised residents, contact with any type of wound or dressing, after contact with a source that is likely to be contaminated with virulent microorganisms or nursing home pathogens (infected resident, taking rectal temperatures, emptying catheter drainage bags, cleaning up fecal matter, etc.) For these occasions, a maximum reduction in bacterial counts is desirable.

While general purpose cleansers can remove most transient bacteria from the skin, they do not kill the bacteria released. Published studies indicate that antimicrobials increase the likelihood of killing potentially pathogenic microorganisms. In addition, some antimicrobial cleansers provide residual activity on the skin to prevent growth of bacteria on the skin.

There are a variety of antimicrobial hand washing options. According to the American Journal of Nursing, July 1987, the general rule of thumb for using an antimicrobial cleanser is to do so in settings where patients are at a higher risk of infection, in critical health care settings or when exposure to many potential pathogens is likely.

The best antimicrobial cleansers are those that meet high sanitation standards and encourage frequent hand washing through their staff acceptance for mildness, fragrance, hand feel and other aesthetics. Regardless of the cleanser, it needs to be dispensed in a manner to prevent contamination of the remaining cleanser (see sidebar for more details).

There are four basic types of antimicrobial cleansers appropriate for a nursing home facility. These are: general purpose antibacterial cleansers; healthcare personnel handwashing cleansers; alcohol-based products; and CHG (chlorhexidine gluconate) cleansers.

General Purpose Antibacterials

General purpose antibacterials are cleansers gentle enough for everyday use.

The active ingredient is often Triclosan at less than .5%. Triclosan is a colorless and odorless formulation that helps protect against the spread of potentially harmful bacteria. Chloroxylenol (PCMX) at less than .5% is also used in antibacterials. Both provide broad spectrum activity against gram positive and most gram negative bacteria.

Antibacterials are effectively used where some antibacterial killing in addition to cleansing is required, such as in public areas in nursing homes and resident rooms. Low level antibacterials should be selected on their mildness and staff acceptance to promote hand washing.

Healthcare Personnel Handwashes

Skin cleansers containing 1% Triclosan or 1 - 2% Parachlorometaxylenol (PCMX or chloroxylenol) are active against gram positive microorganisms, and most gram negative, fungi, viruses, and tubercle bacilli. These formulations are popular due to their balance between germ killing and mildness on the skin. They remove soils from the skin and aid in reducing the risk of cross-contamination. Because they contain higher concentrations of Triclosan and PCMX, they can provide more effective disinfecting than the general purpose

antibacterial cleanser. Again, it is very important to consider choices based on their mildness and staff acceptance to promote frequent hand washing.

Alcohol-Based Products

Waterless hand sanitizer products can never replace proper soap and water handwashing. However, in areas where hand washing stations are not easily accessible, and hands are not soiled with dirt or heavily contaminated with blood or other organic matter, alcohol gel products can be effective. They generally contain ethyl alcohol. A vigorous, one-minute scrub with enough alcohol gel cleanser to wet the hands completely has been shown to be an effective method for hand antisepsis and is convenient when water is not available.

Alcohol gels are generally effective against most gram positive and negative microorganisms and provide good activity against tubercle bacillus. In addition, they act against many fungi and viruses. They are also frequently available in wipes.

In situations where there is contact with blood or other organic types of soilage and water is not available, the Association for Professionals in Infection Control (APIC) suggests using a towelette to cleanse the hands, and then an alcohol gel to achieve proper antisepsis.

CHG Cleansers

CHG products achieve significant antimicrobial effectiveness in immediate, persistent and residual circumstances. Because of this they are often chosen for use in intensive care settings, with residents recovering from surgery, and at selected nurses stations involved in high risk activities. CHG has a broad spectrum of activity. It is more effective against gram positive than gram negative bacteria and a fair inhibitor of fungi. In vitro CHG is active against some viruses including HIV, herpes simplex virus, cytomegalovirus and influenza.

CHG cleansers are typically available in 2% or 4% concentration. According to APIC News, there appears to be little difference in efficacy. CHG cleansers should again be selected based on staff acceptance.

Conclusion

Overall, products used in a nursing home for resident and staff skin care - from general cleansers to CHG cleansers to lotions - should be selected by people knowledgeable about the purpose of use, the advantages and disadvantages of each and, above all, the acceptance of the product by the users.

Once a product is purchased, it is important to motivate the nursing home staff to use it, whether it is for hand washing or resident care. Three effective ways to

accomplish this are to provide continuing education of the importance of hand washing, make sure the products selected are pleasant to use and meet the tasks at hand, and ensure they dispense properly at all times both when and where needed.

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Sidebar #1

Proper Hand Washing Techniques:

1. Wet the hands and forearms using running water.
 - Excessively hot water is harder on the skin, dries the skin and is too uncomfortable to wash with for the recommended amount of time.
 - Cold water prevents proper lathering of the soap and soil and germs may not be washed away.
2. Apply cleanser.
 - Dispensers should be used to deliver the proper amount of cleanser while protecting the remaining product from contamination.
 - Use a product designed for your cleaning task — general purpose or antimicrobial skin cleansing.
 - Read directions for proper dispensing amounts.
3. Thoroughly distribute and lather over hands.
 - Scrub the hands and forearms well, for at least 15 seconds, and use a nail brush if necessary. Repeat until the skin is thoroughly clean.
4. Rinse thoroughly. Dry the hands completely.
 - Leaving soap residue on the skin and incomplete drying can contribute to dermatitis.
5. Use a paper towel to turn off the faucet to prevent re-contaminating clean hands.
6. Use a hand lotion after washing to ease dryness from frequent handwashing.
 - Hand cream helps restore the skin's natural oils that keep it resilient. Skin conditioning agents (emollients) soften and smooth skin, and moisturizers reduce the shedding of dry skin flakes and microorganisms.

Other tips to ensure cross-contamination is minimized:

- Rinse the hands with running water with the hands pointed downward to avoid contaminated water running up the forearm.
- Avoid long nails, nail polish and jewelry, which harbor microorganisms. Remove jewelry prior to washing.
- Do not use gloves in place of hand washing — gloves are also subject to contamination.
- Always wash hands after removing gloves. The moisture that builds up under gloves can encourage the growth of microorganisms.
- Examine your skin daily for cracks and lesions.
- Do not touch anything before returning to work.

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Sidebar #2

A Good Soap Dispensing System Should Have The Following Features:

- Protect the remaining product from contamination. Even antimicrobial products can become contaminated if organisms are repeatedly introduced during usage.
- Mount in convenient areas to encourage usage. Healthcare professionals often complain that they are too busy to wash their hands. Dispensers mounted in numerous convenient locations allow them to wash with a minimum of time, and also clearly state the nursing home's position toward hand washing.
- Allow for easy activation with one hand or a forearm so the user doesn't have to soil the dispenser if their hands are heavily contaminated or very dirty.
- Operates reliably with a minimum of maintenance. Even the best cleanser will not prevent contamination if it cannot be dispensed.
- Mount easily with either tape or screws.
- Load and service easily.

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