Study Confirms Passive Safety Devices Are Most Effective in Needlestick Injury Prevention

Bio-Medicine.Org

BETHLEHEM, Pa., Oct. 26 /PRNewswire/ -- A landmark study of 22 million safety devices used in 61 French hospitals over a two-year period has confirmed the theory that passive, fully automatic safety devices offer significantly better protection against accidental needlestick injuries (NSIs) than early generation active safety technologies such as semi-automatic (push-button) devices or those with manually sliding shields or hinged caps.

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This study, described in the article "Needlestick Injury Rates According to Different Types of Safety-Engineered Devices: Results of a French Multicenter Study" in the April 2010 issue of *Infection Control and Hospital Epidemiology*, was the first head-to-head comparison of safety-engineered devices by safety technology type. It was conducted by GERES (Groupe d'Etude sur le Risque d'Exposition des Soignants), a well-established, government-funded research group.

The study concludes that passive safety engineered devices are more effective than active devices for NSI prevention.

Among its findings, the study documents the procedure specific needlestick injury rate by safety device technology. For intravascular catheters the NSI rate for passive or fully automatic devices studied was 1.31 per 100,000 devices used, compared with 2.54 per 100,000 devices used for semi-automatic (push-button) technology and 4.34 per 100,000 devices used for manually sliding shield technology. With semi-automatic and sliding shield devices, healthcare workers can choose whether or not to operate the safety features. Passive, fully automatic devices, on the other hand, "require no input from the user" and "eliminate the need for elaborate training." Ac
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