hour of care, the amount of time spent with handwashing at the sink quickly becomes prohibitive [7, 9].

In contrast, waterless, alcohol-based hand rubs, readily available at the bedside in small bottles or dispensers, allow much faster hand hygiene during patient care, achieve higher and more rapid microbial killing, and may even exert a prolonged antimicrobial effect when chlorhexidine or similar substances are added [1, 8–10]. Although alcohol-based hand disinfection has been used in many countries around the world and has been shown to be superior to handwashing in many important microbiological and technical aspects [11], including decreased skin irritation when emollients [1, 10] are added, the use of alcohol-based hand rubs remains very limited in the US health care system. This is remarkable given that Semmelweis’ original experience was actually related to hand disinfection and not handwashing! We conclude that there is an urgent need to reconsider the true message of Semmelweis and evaluate ways to implement and disseminate hand disinfection in the United States.

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References

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Clinical Infectious Diseases 2000;30:990–1
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Association of Primary Pneumocystis carinii Infection and Sudden Infant Death Syndrome

SIR—Histological evidence indicates that primary Pneumocystis carinii infection is associated with sudden infant death syndrome (SIDS) [1]. Fifty-five (31%) of 177 infants who died in the community from no apparent cause had positive lung specimens, whereas only 10 (2.9%) of 342 infants who died of multiple causes in hospitals had positive lung specimens (cases with AIDS and malignancies were excluded from the study). We recommend that the high prevalence of P. carinii infection in infants with SIDS warrants further investigation [1].

In future studies, it will be useful to compare the iron status of case patients with that of control subjects. As with other microbial pathogens, P. carinii infection is associated with iron-loaded patients [2] and is suppressed by iron chelator therapy [3]. In a study of 66 infants who died of SIDS and 28 who died of other causes, the hepatic median iron concentration was, at autopsy, 296 μg/g wet weight and 105 μg/g wet weight, respectively [4]. Moreover, increasing the iron concentration of infants by feeding them iron supplements and/or iron-fortified milk formula have been reported as a risk factor for developing SIDS [5].

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Clinical Infectious Diseases 2000;30:991
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