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# EVALUATION OF A NEW HAND PROTECTION PROCEDURE IN A PILOT WARD OF A UNIVERSITY HOSPITAL



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## INTRODUCTION

The multiple use of hydroalcoholic solutions for hand disinfection often causes caregivers to suffer skin dryness and lesions. Such side-effects may induce caregivers to diminish their use of painful hydroalcoholic solutions, thus increasing the risk of patient contamination.

## OBJECTIVE

Our objective was to evaluate Excipial Protect <sup>(®)</sup>, a new handcream whose early application is claimed to prevent cutaneaous dryness and lesions for 8 to 10 successive disinfections without decrease in disinfectant effectiveness.

### METHOD

This study was conducted in a 66-beds geriatric and geriatric rehabilitation unit (70 caregivers) of a university hospital (CHUV).

The caregivers were invited to describe their skin condition and have their hands examined. They were then asked to use the Excipial Protect<sup>®</sup> cream for 4 weeks, at the end of which they were interviewed and their hands examined again.

#### RESULTS

Sixty-one subjects, mostly nurses (39%) and helpers (20%) were interviewed. Their skin condition is shown in Figure 1.

A large minority (43%) considered the skin of their hands to be sensitive; 28% suffered from acute skin lesions.. A handcream was used regularly by 39% of participants during work, and by 72% outside work.

Forty-one participants could be included in the study. After the 4 weeks, 88% of them confirmed applying the Excipial Protect <sup>®</sup> cream 1-3 times per day. A majority (66%) continued using a handcream outside work.

Their feeling of skin sensitivity after applying Excipial Protect <sup>®</sup> is shown in Figure 2.

Practically all participants who had not experienced improvement nevertheless noted a stabilization of their skin condition.

Taken globally, the results show that the Excipial Protect <sup>®</sup> cream was considered markedly (44%) to moderately (44%) useful by the vast majority of participants, 83% of which expressed the wish to continue using it.



## CONCLUSIONS

Evaluating the performance of a handcream is difficult since slight cutaneous modifications are barely visible clinically and the time needed to observe an objective improvement is long (around 2-3 months). More detailed physiological skin characterization such as water loss, stratum corneum hydration, pH or erythema need larger infrastructure to be set up.

Safeguarding the cutaneous health of the hands of caregivers is of primary importance to ensure the hygiene and safety of patients while guaranteeing the comfort of the staff. The use of the Excipial Protect <sup>®</sup> cream represents a viable solution to this end.