

Last Updated: Monday, 17 January, 2005, 00:03 GMT

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Could a dressing help in superbug fight?

By Nick Triggles

BBC News health reporter

An Austrian doctor believes a dressing containing silver can virtually eradicate the cross infection of MRSA in hospitals.

But can this dressing, which is already used in the UK to treat burns victims, really have an impact on the NHS, where the so-called superbug is wreaking havoc?

A simple dressing would seem little use in the fight against the superbug which is sweeping across Britain's hospital wards and operating theatres.

After all, hospital-acquired infections, such as MRSA, kill 5,000 a year and cost the NHS £1bn.

But a dressing, laced with silver, may well prove the best weapon in the fight against MRSA (methicillin-resistant staphylococcus aureus), according to an Austrian expert.

For more than a year Professor Robert Strohal, associate professor of dermatology at the Federal Academic Hospital in Feldkirch, studied the effectiveness of a silver-impregnated dressing, called Acticoat, at two hospitals.

Death

Wounds infected with MRSA were covered with the dressing, which works by releasing silver ions into the wound for up to seven days, ridding the patient of the infection.

He found that in 95% of the tests, which were performed on patients for three days after applying the dressing, the infection had not escaped.

What is more, the dressing had helped to reduce the level of infections in two-thirds of cases - particularly important as MRSA is extremely resistant to treatment by antibiotics.

The full findings are expected to be published in a leading medical journal in the next few months.

Prof Strohal said: "I was shocked by the results. I never expected them to be that effective.



Current guidelines urge high levels of cleanliness to safeguard against MRSA

“ If these dressings were used as standard, as I think they should be, they would save lives ”

Tony Field

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"The dressing does not allow the infection to escape, which

means any nurses and doctors that come into contact with the patient do not then get the bug and pass it on to other patients.

"This could have a dramatic effect if it was adopted as standard practice in countries like the UK and US where MRSA is a real problem."

The levels of MRSA infection in Austria are half those in the UK.

Prof Strohal believes that is down to a combination of cleaner hospitals and the use of the dressings, which have been used as standard practice for treating wounds infected with MRSA for the last couple of years.

Treatment

There are no official figures for how widely used silver-backed dressings are for UK MRSA patients. However, doctors and nurses BBC News spoke to said they were far from common.

The NHS Purchasing and Supply Agency says £10m of silver dressings are bought each year for the health service - but the overwhelming majority go on treating burn and skin graft patients or to GPs, often for people with diabetes.

The hospital infection rapid review panel, set up a year ago by the Department of Health (DoH) and the Health Protection Agency to make recommendations to the NHS about infection control, has not considered the dressing yet.

However, a DoH spokesman said it was certainly something that could be looked at in the future.

In December, the panel recommended the use of silver hydrogel catheters to reduce infections.

They are beginning to become routine in hospitals across the country following the advice.

But Professor Strohal urged the UK government to act straight away on the dressing.



Professor Strohal spent more than a year testing the dressing

He said while the dressing was more expensive than standard products - by about 50% - it would more than pay for itself by slashing the bill for treating infected people.

"It is obvious if the UK started using them, it would prove cost-effective, so much is spent each year on the bug.

"We need to investigate this further, but it is possible the dressings will mean there is no need to isolate patients anymore - that would be another huge cost saving."

Professor Strohal is now working towards setting up a pan-European study in an attempt to get the dressing included in European guidelines.

"At the moment all the recommendations are to do with general management of MRSA, hand-washing, isolation, disposal of aprons; there is nothing to deal with the bug at site, in the wound."

Infected

Health professionals in the UK also believe it is worth considering using it more.

The superbug has become such a problem in Britain - one in six intensive care patients become colonised or infected with MRSA - that it is threatening to be a key battleground in the forthcoming general election.

Jean Lawrence, chairman of the Infection Control Nurses Association, said: "We are aware of the benefits of both the catheters and dressings. Some of the nurses who have used them said they were fab.

"It is hard to say how commonplace they are but they do have the potential to combat the spread of MRSA."

And Steve Thomas, director of the Materials Testing Laboratory, which provides testing services for the NHS and manufacturers, said the use of silver-impregnated dressings needed to become standard when dealing with MRSA.



The dressing works by releasing silver into the wound

Mr Thomas, who has done research on the dressings, said: "One problem is that there are a few different types on the market, containing various quantities of silver.

"The good ones, such as Acticoat, are very effective at stopping the cross infection of MRSA.

"We should be careful not to overuse the dressings as MRSA could become resistant to the silver.

"However, I would say when a wound is infected with MRSA, the silver dressings should be used as routine."

Tony Field, chairman of MRSA Support, a group for victims, agreed.

"The work Professor Strohal has done is incredible. We have to be combating MRSA at site and that means the wound.

"If these dressings were used as standard, as I think they should be, they would save lives.

"It is all very well isolating patients, improving hygiene, but that is not really tackling the problem head on.

"This could be the best chance we have."

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