

is associated with fewer adverse neurologic events in the elderly population,²² might also be an option.

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Medical News

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Isolation Measures in the Hospital Management of Methicillin-Resistant *Staphylococcus aureus*

Cooper and colleagues from London evaluated the evidence for the effectiveness of isolation measures in reducing the incidence of methicillin-resistant *Staphylococcus aureus* (MRSA) colonization and infection in hospital inpatients. They performed a systematic review of published articles. Articles reporting MRSA-related outcomes and describing an isolation policy were selected. No quality restrictions were imposed on studies using isolation wards or nurse cohorting. Other studies were included if they were prospective or employed planned comparisons of retrospective data. A total of 46 studies were evaluated; 18 used isolation wards, 9 used nurse cohorting, and 19 used other isolation policies. Most were interrupted time series. Well-designed prospective studies were not found. All but one study used multiple interventions. Consideration of potential confounders, measures to prevent bias, and appropriate statistical analysis were mostly lacking. No conclusions could be drawn in one-third of the studies. Most others provided evidence consistent with a reduction of MRSA acquisition,

however. Six long interrupted time series provided the strongest evidence. Four of these provided evidence that intensive control measures including patient isolation were effective in controlling MRSA. In two others, isolation wards failed to prevent endemic MRSA. The authors concluded that major methodologic weaknesses and inadequate reporting in many of the 46 studies made it difficult to exclude plausible alternative explanations for reductions in MRSA acquisition. Nevertheless, the authors concluded that there was sufficient evidence from the published studies and from mathematical modeling that concerted efforts that include isolation can reduce MRSA even in endemic settings. They reasoned that isolation measures recommended in national guidelines should continue to be applied until further research establishes otherwise.

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