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## Infection Control Measures Reduce Transmission of VRE

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Montecalvo and coinvestigators from New York Medical College, Westchester Medical Center, and the CDC's Hospital Infections Program studied whether enhanced infection control strategies reduced transmission of vancomycin-resistant enterococci (VRE) in an endemic setting (an adult oncology inpatient unit). Two hundred fifty-nine patients were evaluated during use of enhanced infection control strategies, and 184 patients were evaluated during use of standard infection con-

trol practices. For enhanced interventions, patient surveillance cultures were taken, patients were assigned to geographic cohorts, nurses were assigned to patient cohorts, gowns and gloves were worn on room entry, compliance with infection control procedures was monitored, patients were educated about VRE transmission, patients taking antimicrobial agents were evaluated by an infectious disease specialist, and environmental surveillance was performed.

During use of enhanced infection-control strategies, VRE bloodstream infections decreased significantly (from 2.1 to 0.45 patients per 1,000 patient-days,  $P=.04$ ), as did VRE colo-

nization (from 20.7 to 10.3 patients per 1,000 patient-days; relative rate ratio,  $P<.001$ ). Use of all antimicrobial agents except clindamycin and amikacin was significantly reduced.

The authors concluded that enhanced infection control strategies reduced VRE transmission in an oncology unit in which VRE infections were endemic.

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