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# SHEA News

## THE SOCIETY FOR HEALTHCARE EPIDEMIOLOGY OF AMERICA

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## SHEA's Fourth Annual Meeting Big Success

The Fourth Annual Meeting of SHEA, which took place in New Orleans from March 20-22, 1994, is now history. The number of registrants was 530. Over the 2<sup>1</sup>/<sub>2</sub> days of this year's meeting, the high quality of the scientific content was attested to by the seven state-of-the-art symposia, the 164 papers presented in either oral or poster format, and the SHEA lecture, given this year by Dr. Ted Eickhoff.

In keeping with the diverse interests of our membership, there were concurrent sessions on quality assessment and on surveillance, as well as the preconference workshops at which attendees had the opportunity to spend a half day learning with quality improvement or computer gurus. The meeting was enriched further by the 22 exhibitors.

Next year's SHEA annual

meeting will be held at the Town and Country Hotel in San Diego, April 2-4, 1995. The scientific program coordinator, Dr. David Bell, already is involved in the advanced stages of planning the program and calls on the membership to plan to register for the meeting, and to present their current work to their colleagues and peers at this meeting.

## HICPAC Responds to the Threat of Multiple Antibiotic-Resistant Microorganisms in Hospitals

In response to the growing incidence of vancomycin-resistant enterococci in U.S. hospitals, the Centers for Disease Control and Preventions Hospital Infection Control Practices Advisory Committee (HICPAC) recently convened a 1-day workshop to discuss possible strategies for the prevention and control of antibiotic-resistant organisms.

Besides the CDC and HICPAC, other organizations that were represented included the American Hospital Association (Ms. Gina Pugliese and Dr. Robert Weinstein), the Infectious Diseases Society of America (Dr. Dennis Maki), and the American Society for Microbiology (Dr. Mary Gilchrist). The workshop

broke into three working groups. Working group 1 was charged with examining infection control practices that might be effective in the control and prevention of the spread of vancomycin-resistant enterococci. Control measures that were proposed included: patient isolation in a single room or with a cohort, use of gloves for all individuals entering the room, use of gowns when there is substantial contact with a patient or contaminated items in the environment, and such environmental measures as cleaning of noncritical items used for multiple patients, for example, electronic thermometers, terminal cleaning of rooms, and environmental culturing as a quality control

indicator. The working group considered a two-level approach whereby fewer control measures might be instituted if the prevalence of resistant enterococci is low. In general, however, the working group concluded that the relative effectiveness of these infection control measures is unknown and further research is needed.

Working group 2, chaired by Dr. Robert Gaynes of the CDC, examined the methods hospital laboratories currently use in the testing and detection of antibiotic-resistant enterococci and other important gram-positive organisms. The group concluded that current approaches for the detection and