

PREVENTING NEEDLESTICK INJURIES

WHAT IS THE PUBLIC HEALTH PROBLEM?

- In the United States, approximately 384,000 needlestick and other sharps injuries occur each year among hospital-based health care workers alone.
- Such injuries carry the risk of exposure to infectious bloodborne diseases (e.g., human immunodeficiency virus [HIV], hepatitis B virus [HBV], and hepatitis C virus [HCV]). Even when a serious infection is not transmitted, the emotional impact of a needlestick injury can be severe and long-lasting.
- A substantial proportion of needlestick and other sharps injuries could be prevented through the use of safer medical devices and incorporation of a comprehensive program of training and safe work practices.
- Recent federal and state legislation mandates the use of safer medical devices.

WHAT HAS NIOSH ACCOMPLISHED?

The National Institute for Occupational Safety and Health (NIOSH) is responsible for conducting research and making recommendations for the prevention of work-related illness and injury. For needlestick and other sharps injuries, this is accomplished through a comprehensive research agenda which is centered around the surveillance of blood exposures, developing recommendations for exposure management, disseminating strategies for reducing these exposures through the use of engineering and administrative controls, and conducting a variety of training and education programs. NIOSH has undertaken research and distributed scientific information and recommendations to help prevent needlestick injuries among health care and public safety workers and has funded research to estimate the risk of exposure to blood for correctional health care workers, operating room personnel, and health care workers employed in non-hospital settings.

Examples of program in action:

NIOSH developed a specific Web site that contains information on needlestick prevention. In addition, NIOSH has partnered with hospitals, home health care agencies, nursing homes, and dental offices to work through the process of identifying, selecting, evaluating, and implementing safer medical devices. These health care facilities share their experiences on how the process was accomplished and, most importantly, lessons learned, on a special Web site that is visited by more than 1,500 visitors each month.

WHAT ARE THE NEXT STEPS?

NIOSH will continue to monitor needlestick injuries and other blood exposures among health care workers and provide information on the management of occupational exposures, including updating recommendations for post-exposure prophylaxis. In addition, NIOSH is investigating the risks of blood exposure among health care workers, including those who work in home settings. NIOSH also is investigating the risks of blood exposure among community workers such as body piercers, tattoo artists, waste handlers, and police officers.

Additional information is available at www.cdc.gov/niosh/topics/bbp/and www.cdc.gov/niosh/topics/bbp/anf www.cdc.gov/niosh/topics/bbp/anf www.cdc.gov/niosh/docs/pib/.

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