HEALTHCARE WORKERS AND HIV DEBATE GOES ON

The issues of testing healthcare workers for human immunodeficiency virus (HIV) infection and work restrictions for HIV-infected healthcare workers continue to be hot topics of debate. The SHEA/APIC position paper dealing with these issues was published several months ago (1990;11(12):647-656). Preliminary analysis of the HIV serosurvey of orthopedic surgeons undertaken during the annual meeting of the American Academy of Orthopaedic Surgeons in March 1991 was reported to show that, despite frequent occupational blood contact, including percutaneous injuries, there was no evidence of occupationally related HIV infection among the approximately 3,000 surgeons tested, including many who trained or practiced in areas of high HIV/acquired immunodeficiency syndrome (AIDS) incidence. In June, the American Medical Association debated and advised against mandatory screening of healthcare workers. Now, it is the public health services’ turn; their recommendations, which were stuck in Foggy Bottom for several months, should be published as the Newsletter goes to press.

NUCLEAR MEDICINE AND BLOOD RISK

You probably shook your head when you read the recent New England Journal of Medicine report (1990;332:1375) about a mishap in which a patient was reinjected with someone else’s blood during the performance of a nuclear medicine study. Unfortunately, the source of the erroneously injected blood was human immunodeficiency virus (HIV)-positive, and the recipient became infected with HIV despite prophylactic zidovudine therapy. Was this a rare, isolated event? Could it happen readily in your hospital? Similar instances of inadvertent blood mixup reportedly have occurred over the past few years during the performance of nuclear medicine studies in other hospitals. Now is a good time to review the safeguards used in your hospital to avoid blood mix-ups, and particularly the safeguards that are undertaken if blood specimens leave your hospital as part of the nuclear medicine procedure for radiolabeling.