Sharing Eyedrops between Patients: When Will It End?

To the Editor—The Centers for Disease Control and Prevention recently released a Morbidity and Mortality Weekly Report on 6 outbreaks of adenovirus-associated keratoconjunctivitis in 4 US states occurring between 2008 and 2010. These epidemics occurred in outpatient ophthalmologic clinics and a neonatal intensive care unit, and a total of 411 cases were identified. A goal of the American Academy of Ophthalmology Infection Prevention Statement (2012) is zero tolerance for healthcare-associated infections. The academy acknowledges that adenovirus is the main cause of nosocomial outbreaks of conjunctivitis occurring in eye clinics, nursing homes, and child care centers and that transmission can occur from ophthalmic solutions and instruments. The academy condones the practice of sharing eyepot medications for multipatient use to be more economically viable than single-patient-use eyepot vials. However, this ignores the cost of outbreaks of nosocomial infections related to the use of multipatient eyepot bottles. As we strive to reduce all healthcare-associated infections, we should encourage the manufacture of inexpensive single-patient eyepots for use in healthcare facilities. While there is any opportunity for the transmission of bacteria or viruses to occur, it is surprising that the sharing of any kind of medication between patients in healthcare settings is still considered acceptable practice.

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