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P 1

A study of residual viable bio burden in reprocessed side-view endoscopes used for Endoscopic Retrograde Cholangiopancreatography (ERCP) in a clinical setting

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Introduction

High level disinfection of side-view endoscopes used for ERCP is recommended since accessories such as biopsy forceps, polypectomy snares, guide wires come in contact with sterile sites. Procedural errors in cleaning and disinfection of endoscopes have been documented. To the best of our knowledge, this is the first study carried out in Sri Lanka to objectively analyze the sterility concerning therapeutic side-view endoscopes.

Objective

Aim of this study was to evaluate the efficacy of reprocessing of side-view endoscopes in tertiary reference endo-therapy unit of Colombo South Teaching Hospital.

Methods

Over a period of seven months hundred and two samples obtained from two different flexible side-view endoscopes were tested for microbial growth. Three samples were collected before and after the reprocessing procedure; 1) swab from the tip before reprocessing, another after manual reprocessing with 1.62% peracetic acid and a final saline sample after flushing through the working channel on completion of reprocessing. Cultures were done according to European Society of Gastrointestinal Endoscopy (ESGE) and the European Society of Gastroenterology Endoscopy Nurses and Associates (ESGENA) protocol.

Results

After reprocessing, tip and working channel of the side-view endoscope were positive for microorganisms 20% and 10% respectively. Multiple organisms were found in swabs from the tips and 2% the working channels. *Pseudomonas* species were found to be the commonest in tips and *Candida* species were found to be the commonest in the working channel of the reprocessed endoscopes.

Conclusion

Current manual reprocessing procedure is not sufficient for inactivation and removal of bio-burden from the side-view endoscopes in spite of strict adherence to the protocol describes for manual reprocessing. Microbiological monitoring of reprocessed side-view endoscopes is valuable to rectify reprocessing method to prevent transmission of infection secondary to ERCP.

OP 2

Comparison of clinical criteria and laboratory criteria used for the diagnosis of bacterial vaginosis

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Bacterial vaginosis (BV) is a common cause of vaginal discharge affecting millions of women annually.

It is caused by an imbalance of naturally occurring bacterial flora resulting loss of vaginal lactobacilli and concomitant overgrowth of mixed bacterial flora. BV is associated with adverse gynecological and pregnancy outcomes and with an increased risk of acquisition of HIV and other sexually transmitted diseases.

There are no studies carried out in Sri Lanka to assess the validity of the methods used to diagnose BV at present.

Objectives

- To determine the prevalence of BV among women who present with vaginal discharge.
- To determine the usefulness of Amsel's clinical criteria to diagnose BV by comparing it with the Nugent criteria, which is the gold standard.

Methodology

300 patients who presented with vaginal discharge to the sexually transmitted diseases (STD) clinic, gynecology clinics and gynecology wards at North Colombo Teaching Hospital, Ragama and STD clinic - Colombo, between 1st January 2011 to 30th April 2011 were included in the study.

Four high vaginal swabs were collected during the speculum examination and examined according to the Amsel's and Nugent's criteria. Appearance of the vaginal discharge was observed.