Medical News

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Manual on AIDS Care in the Home

A comprehensive manual devoted to caring for acquired immunodeficiency syndrome (AIDS) patients at home has been published by John Wiley & Sons Inc, New York. This 360-page book provides simple and practical techniques for persons with AIDS or their caregivers. It includes a chapter on preventing transmission of infection to and from persons with AIDS. For ordering information, call (212) 850-6000.

Unique Species of *Enterobacter* Causes Outbreak in Intensive Care Nursery Patients

The Centers for Disease Control and Prevention (CDC) reported the first outbreak caused by *Enterobacter hormaechei,* an organism that was identified first in 1989. Ten infants in an intensive care nursery (ICN) had *E hormaechei* with the same antimicrobial sensitivity pattern isolated from clinical specimens within a 14-week period. Cases were defined as any ICN patient with positive cultures for *E hormaechei* during the study period. To identify risk factors, case patients were compared with all other ICN patients admitted during the epidemic period. Cultures were performed on selected environmental sites and hands of healthcare workers (HCWs) involved in infant care and isolates and then compared with those of case patients by pulsed-field gel electrophoresis (PFGE) . Ten patients met the case definition: five had bacteremia; one, tracheitis; and four, rectal or nasopharyngeal colonization. Compared with 201 other ICN patients, case patients had a significantly lower estimated gestational age (median, 26 versus 36 weeks; $P<0.001$) birthweight (median, 762 g versus 2550 g; $P<0.001$), and length of stay (median, 53 days versus 1 day; $P<0.001$). *E hormaechei* was isolated from the tops of three isolettes and an ICN doorknob. Environmental and case-patient isolates had identical PFGE-DNA banding patterns. This investigation documents that *E hormaechei* can be a nosocomial pathogen. The authors suggest that case patients acted as reservoirs and contaminated surfaces may have contributed to cross-contamination with this organism.

FROM: Wenger PN, Tokars J, Brennan P, et al. *Enterobacter hormaechei* infection and colonization in intensive care nursery patients, Philadelphia. Presented at the 43rd Annual Epidemic Intelligence Service Conference; April 18-22, 1994; Atlanta, Georgia.

HIV-Positive Orthopedic Surgery Patients Have Increased Risk of Infection

Asymptomatic HIV-positive patients who undergo surgery for bone injuries run a significantly higher risk of infection than HIV-negative patients. These findings were reported by Dr. Guy Paiement, chief of orthopedic surgery at San Francisco General Hospital, at the 1994 annual meeting of the American Academy of Orthopedic Surgeons in New Orleans, Louisiana. Dr. Paiement et al examined the records of 706 patients who had surgery at San Francisco General Hospital for bone injuries between July 1989 and June 1991. HIV-positive patients were found to be three times more likely to develop surgical wound infections: 15.4% (6 of 39) versus 4.5% (30 of 667) among HIV-negative patients. HIV-positive also had a greater risk of other complications from surgery.

Additional news items in this issue: *CDC Reports Two Cases of HIV Transmission in Household Setting (page 519), Outbreak of* Mycoplasma pneumoniae *Among Hospital Employees (page 528), High Prevalence of HIV-Positive Blood Samples Pose Risk to Laboratory Technologists (page 539), Diphtheria Epidemic in Russia Related to High Rates of Adult Susceptibility (page 547), Peripheral Arterial Lines Found to Be Independent Risk Factor for Coagulase-Negative* Staphylococcus epidermidis *Bacteremia in Neonates (page 556).*

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