



# **Central Line-Associated Bloodstream Infections (CLABSI)**

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# Central Line-Associated BSIs

- **Data source** – CDC's National Healthcare Safety Network (NHSN)
- **Metric** – Standardized Infection Ratio (SIR)
- **5 year target** – 50% reduction in ICU and ward-located patients (SIR = 0.50)
- **Baseline period** – 2006-08



# Central Line-Associated BSIs

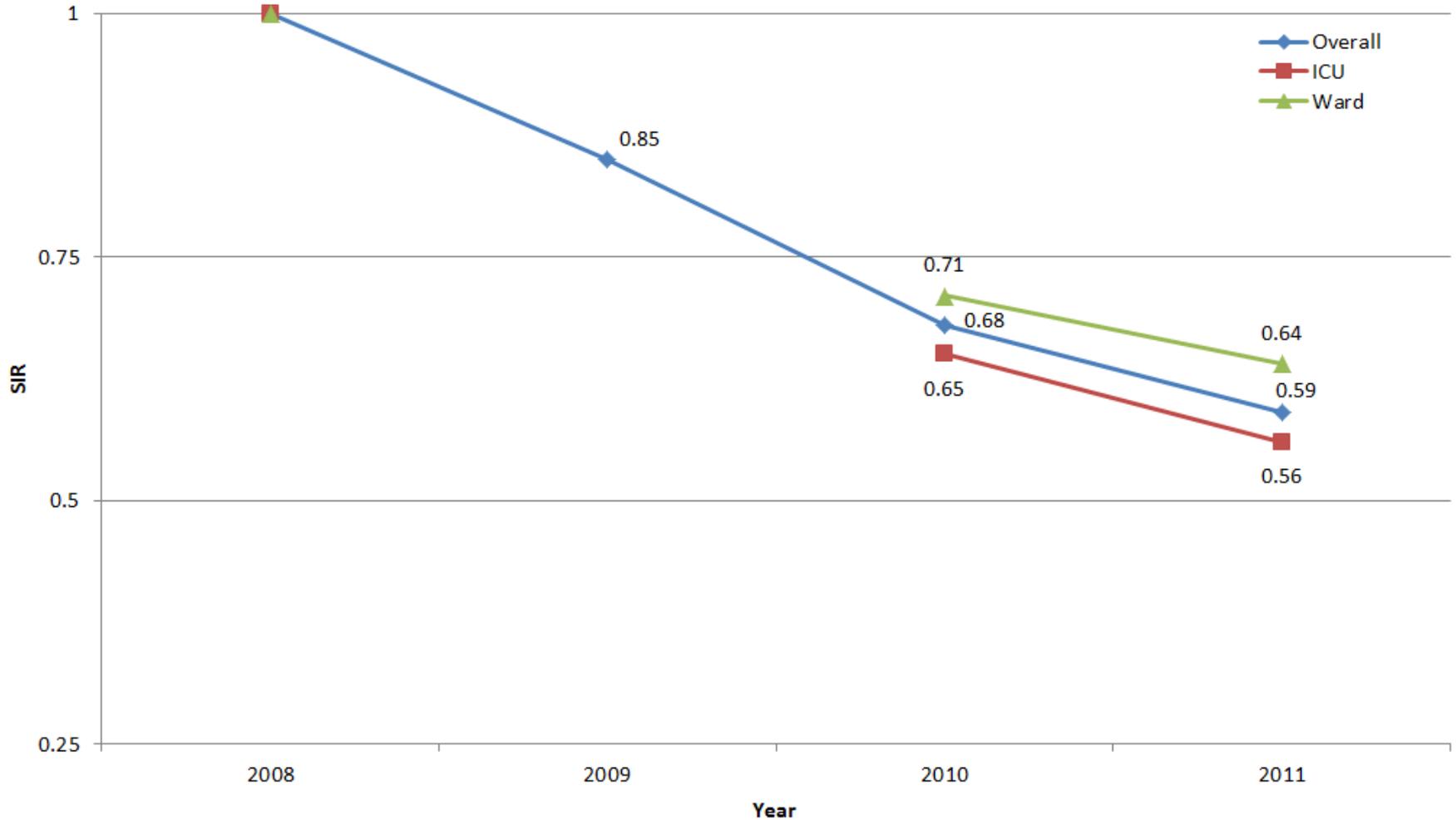
	Baseline 06-08	2009	2010	2011
Facilities reporting	1,385	1,603	2,242	3,472
States represented	48	48	49 + DC	50 + DC + PR
Locations reporting	3,972	4,872	8,430	12,122
% ICU locations	62	62	45	47
Overall SIR	N/A	0.85* (15% reduction)	0.68* (32% reduction)	0.59* (41% reduction)

\*significantly less than 1.0



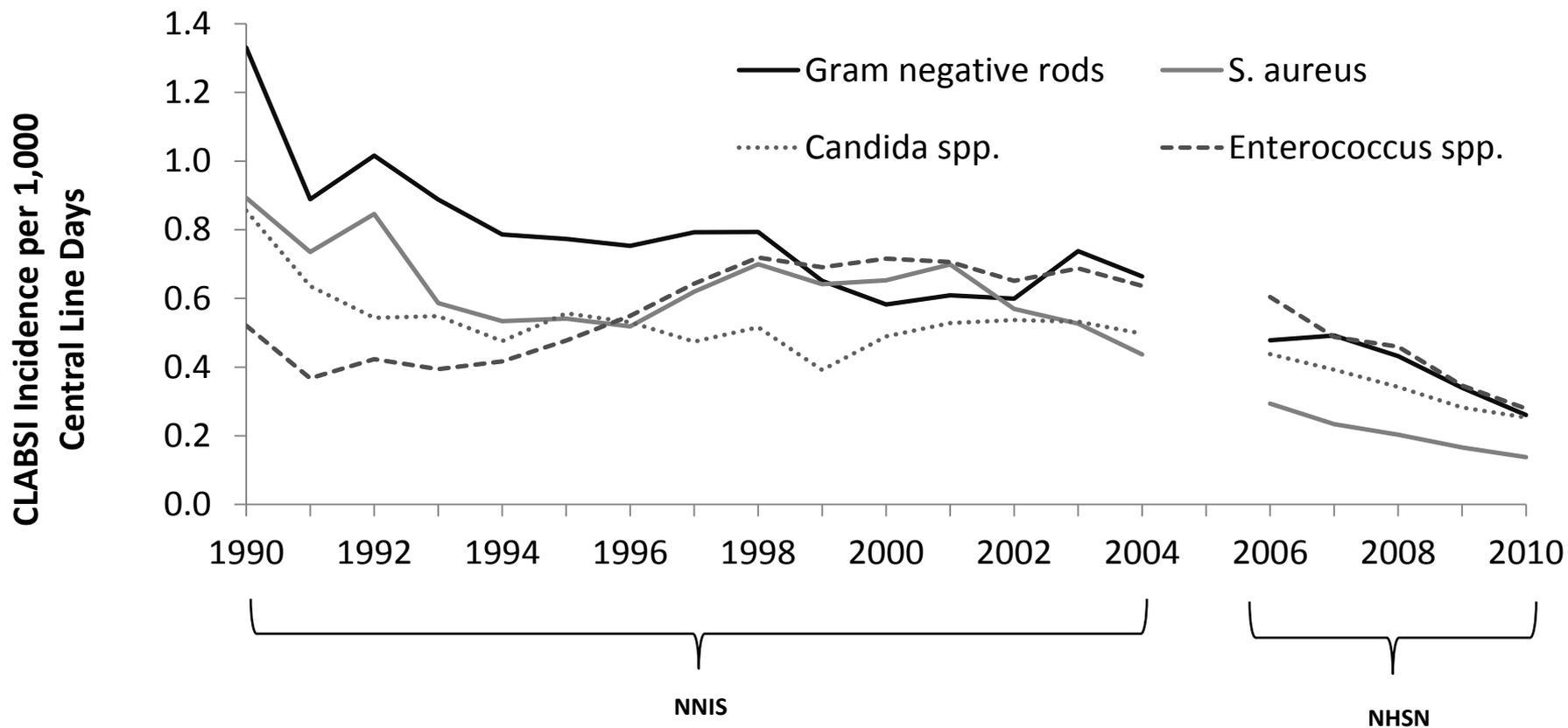
# Central Line-Associated BSIs

## SIR by Year and Location Grouping, CLABSI



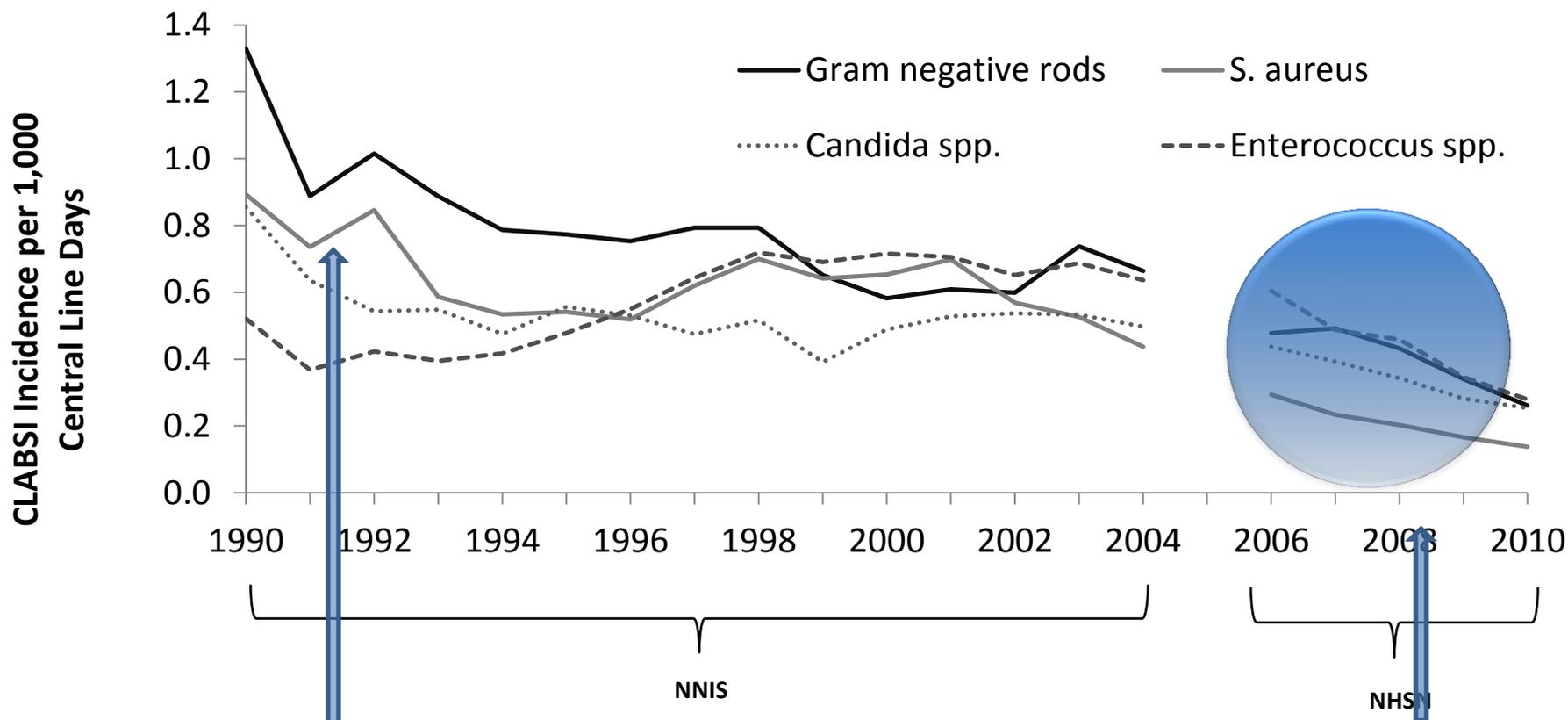


# Pathogen-Specific Pooled Mean CLABSI Incidence per 1,000 Central-Line Days among 7 ICU Types, NNIS (1990–2004) and NHSN (2006–2010)





# Pathogen-Specific Pooled Mean CLABSI Incidence per 1,000 Central-Line Days among 7 ICU Types, NNIS (1990–2004) and NHSN (2006–2010)



*S. aureus* now ½ as frequent as other pathogen groups;

during NHSN years, annual declines of other pathogen groups are smaller than for *S. aureus* CLABSI (17% annual decline)

- Gram-negative bacteria CLABSI annual decline 40% smaller (10% annual decline)
- Candida spp. CLABSI annual decline 40% smaller (10% annual decline)
- enterococci spp. CLABSI annual decline 18% smaller (14% annual decline)

Further CLABSI prevention may need to incorporate strategies beyond best insertion practices