Daily bed-baths for critically ill patients are required to improve patient hygiene, promote comfort and improve health outcomes. Bed baths give a feeling of freshness and relaxation to the patients. Patients admitted in critical care units are at a higher risk for skin colonisation and infection with multidrug-resistant organisms [1]. Therefore, it is essential to provide them with effective personal hygiene and a comfortable method of bathing. However, in resource-limited settings, the options to provide comfortable bath to critically ill patients are few and challenging.

In critical care units, of our main hospital, the practice of bathing of admitted patients that was followed in AB-8 ICU for adults was to use linen towels brought by the patient’s attendant and in D5 ICU for pediatric patients, cotton pads were used as wipes with warm water. In the process of sponging with these towels especially in patients in the critical care unit for adults, there were many practical challenges. The bath towels used to leave their colour when being dipped in water. There was no place to dry them in sunlight. If the wet towel was allowed to be kept by the patient’s bed-side, it used to transmit bad odour and contribute to spread of infection. For subsequent use as well, it was not an acceptable option, as it never gets adequately dried up to be used again. This conventional practice of sponging of patients through bath towels was substituted with a better, hygienic and an infection free method with the use of bath wipes. Bath wipes are disposable, antiseptic wipes that provide a rinse free bathing for patients in the critical care unit. These bath wipes are impregnated with chlorhexidine gluconate solution, an ingredient commonly used as an antiseptic for washing patients [2–3]. Daily bathing with chlorhexidine gluconate (CHG) is an effective intervention for prevention of healthcare associated infections as CHG is
a broad spectrum cationic bis-biguanide antiseptic which is active against Gram-positive bacteria, Gram-negative bacteria, and fungi [4]. Particularly for patients who are immune-compromised or have fresh surgical wounds, avoiding the use of water or a basin bath is considered a better practice [5]. These wipes come in a pack of 10 which costs approximately INR 55 to the hospital. On a given occasion, usually one wet wipe is sufficient enough to give body sponge to one patient. Earmarking of one pack for a patient is done and pack can be sued after closing the dispensing window of the pack. Transition to this contemporary method of bathing for patients saves lot of practical hassles; obviates the need to dry the wet towel in sunlight and/or to keep the one by patient’s bedside. It also helps in preventing the spread of bad odour in the closed environment of a critical care unit, which emanates from wet towels and infections at large.

References


