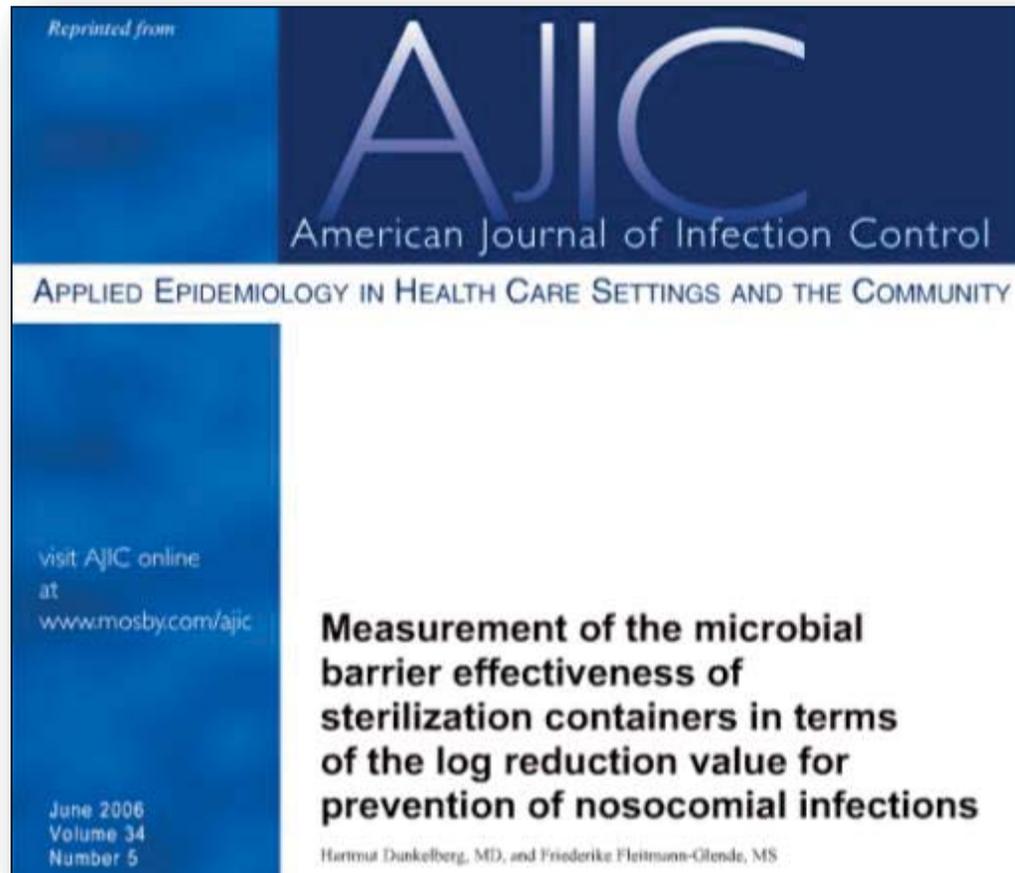


# Dunkelberg Study: Summary Presentation



Study conducted by Dr. Dunkelberg. Please ask your representative for a reprint.  
This study was not funded by KC/Halyard Health.

# Dunkelberg Study Method

- Prof. Dunkelberg tested containers from various hospitals in Germany
- Containers tested ranged in age from new to 15+ years of usage
- All containers were still in use at hospitals
- Hospitals were under the impression that their containers provided a sufficient microbial barrier



# Test Methodology

- Petri plates were placed into the container, then closed and steam sterilized
- After sterilization, the container was placed in a chamber where the air pressure was changed to simulate tray cool down and transport
- The air surrounding the tray contained bacteria to check if there were open pathways in filters, retention plates, gaskets, etc.
- The closed containers were stored in an incubator
- Finally, the container was opened to check how many colony forming units of bacteria developed



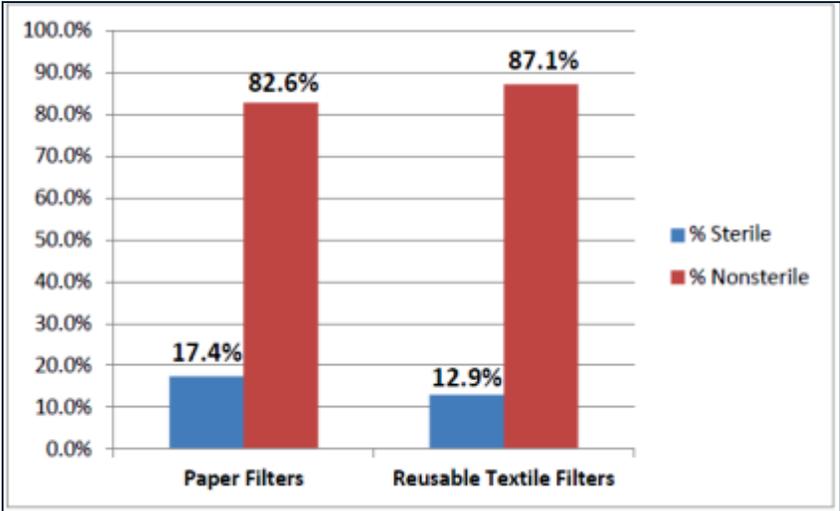
# Rigid Containers Used in Hospitals Inspected for Integrity, Then Challenged

All Containers Tested (standard and half-size)			
Filter type	# Tested (4 hospitals)	# Containers Let Bacteria Through	Percent Nonsterile
Paper	69	57	82.6%
Reusable Textile Filters	132	115	87.1%
Permanent Plastic Filters*	15	1	6.7%
<b>All filters (216 containers)</b>	<b>216</b>	<b>173</b>	<b>80.1%</b>

\* Of the 15 plastic filter containers, 5 (33%) were brand new, rest less th



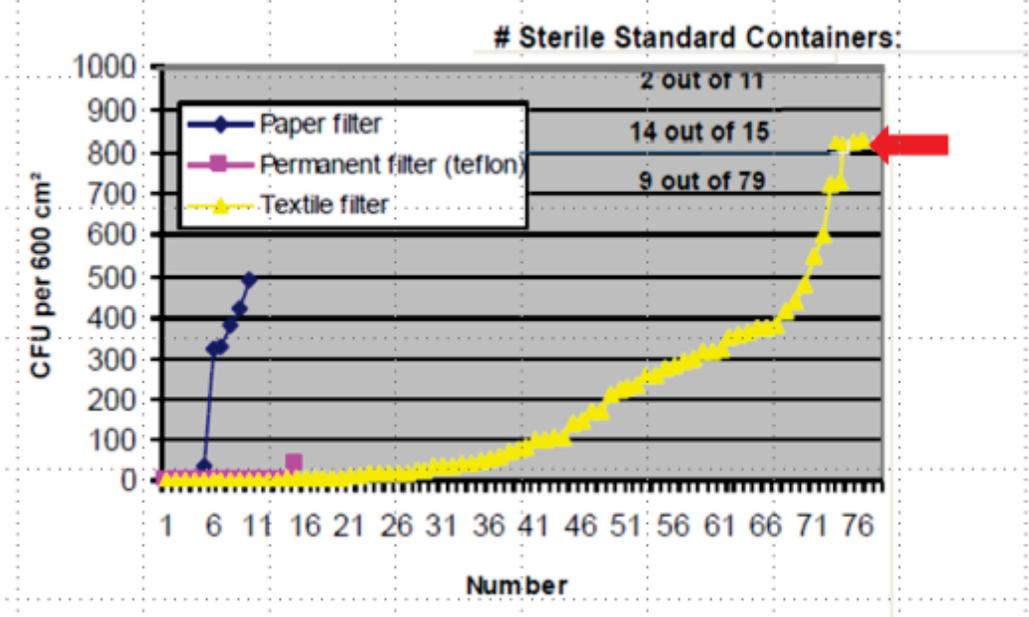
# Study Data Per Paper & Textile Filter Containers



- Dunkelberg analyzed data by container size & by filter type as designators
- However, failures occur not only at the filters, but also anywhere on the containers, as this test challenged the “whole container”.

gaskets	bolts	handle attachment
chips	dents/cracks	gaps in filter-housing
latches	valves	poor filter securement
nuts	filter	more often used, more likely breaches

# All 105 Standard Sized Containers From Study



\* Of the 15 plastic filter containers, 5 (33%) were brand new, rest less than 2 years)

- Shows how many bacteria (CFU) enter sealed container per surface area of Petri plates lining the container floor
- Example: 79 containers with textile filters (yellow triangles):
  - 9 containers had no bacteria so there are 9 yellow triangles on the zero CFU base line
  - 45 containers (yellow) had  $\leq 100$  bacteria/600 cm<sup>2</sup> (Petri plates lining bottom)
  - 4 containers had the highest contamination rate at approx. 800 bacteria per 600cm<sup>2</sup>



# Sterile? How Confident Are We?

- A rigid container is washed, processed through sterilization, and used on thousands of patients throughout its life cycle.
  - Junghannss estimated that containers were reprocessed and re-used 1,400 to 2,300 times (this is probably a low estimate)
- Study raises the question: How many surgeries are performed on patients with non-sterile instruments or implants from failed containers?

## Surgical Infection Perspective

- 27 million surgical procedures performed annually in the United States
- 780,000 surgical site infections (SSI)
- \$27,000 is the average cost per SSI: (varies significantly )
- Example: Initial hip replacement infection averages \$26,812; if a second re-admission due to a recurrence of the infection: an additional \$31,046 = \$57,858! (no CMS reimbursement – hospital eats cost of both)
- Approximately 12.5% of hip replacement SSI recur.

# Dunkelberg on Opportunities for Barrier Integrity Damage

- Dunkelberg emphasized that there are many ways to compromise the barrier integrity of a rigid container
  - Latch securement to container can deteriorate
  - Seals can be damaged by repeated high heat, steam, mechanical stress
  - Rivets, bolts, nuts can be loosened with reprocessing, transport and jostling
  - Transport and handling can dent, crack, chip and stress
  - Filters can be poorly secured, housings fasteners fail, seals deteriorate and filters can be punctured, abraded overused



# Is It Performing The Purpose Intended?

- For safety & efficiency we service cars at specified intervals
- Brakes, tire wear, belts, gaskets, seals, air filters, oil filters
- Why? They: become worn, oxidized, damaged, stretched, dented; lose seal integrity, shake loose, get dirty, occlude, tear, abrade, puncture
- Failure to do so, puts lives at risk:

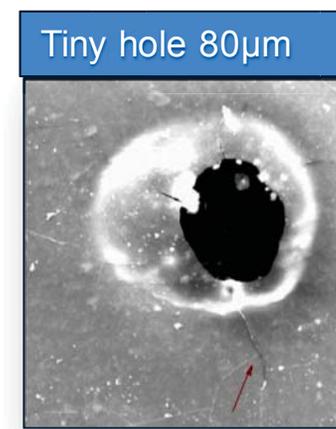


NUMBER OF MONTHS OR MILES	LUBE, OIL, FILTER	ENGINE FLUSH SERVICE	ROTATE TIRES	INSPECT WHEEL ALIGN	TUNE-UP	FUEL SYSTEM CLEANING SERVICE	POWER STEERING FLUSH	TRANS FLUSH SERVICE	COOLING SYSTEM SERVICE	INSPECT BRAKE SERVICE	BRAKE SYSTEM FLUSH	BATTERY SERVICE
3 month 3,000 miles	✓											
6 month 6,000 miles	✓		✓							✓		
9 month 9,000 miles	✓											
12 month 12,000 miles	✓		✓							✓		
15 month 15,000 miles	✓			✓				✓				
18 month 18,000 miles	✓		✓							✓		✓
21 month 21,000 miles	✓											
24 month 24,000 miles	✓	✓	✓			✓	✓			✓	✓	
27 month 27,000 miles	✓											
30 month 30,000 miles	✓		✓	✓	✓			✓	✓	✓		
33 month 33,000 miles	✓											
36 month 36,000 miles	✓		✓							✓		✓
39 month 39,000 miles	✓											
42 month 42,000 miles	✓		✓							✓		
45 month 45,000 miles	✓	✓		✓				✓				
48 month 48,000 miles	✓		✓			✓	✓			✓	✓	
51 month 51,000 miles	✓											
54 month 54,000 miles	✓		✓							✓		✓
57 month 57,000 miles	✓											
60 month 60,000 miles	✓		✓	✓	✓			✓	✓	✓		

# Sterile

- Hospital-associated infections (HAI) kill more people in the US than motor vehicle, breast cancer and HIV combined
- SSI represent 17% of all HAIs
- With over 27 million operative procedures performed annually, isn't it essential that the instruments, devices and implants that we certify as sterile, are indeed sterile?
- Our initials represent our personal professional assurance

	Each Use	Yearly
<b>Seals</b> <ul style="list-style-type: none"> <li>• Worn</li> <li>• Abraded</li> <li>• Cuts. Creases</li> <li>• Slipped from position</li> <li>• Lose</li> <li>• Hardened</li> <li>• Degrading (oxidized)</li> <li>• Stretched</li> </ul>	✓	
Dents, cuts, cracks	✓	
Handle	✓	
Filter Housing	✓	
Latch	✓	
Bolts, rivets, nuts for movement	✓	
Test bacterial barrier effectiveness		✓



## Even Diligent Visual Inspection, No Guarantees

Object	Millimeters (mm)	Micrometers ( $\mu\text{m}$ ) aka: microns
Smallest size human can see	0.100	100
Magnified hole above, too small to see	0.080	80
<i>Staphylococcus aureus</i> bacterium	0.001	1

80 *Staphylococcus* bacteria standing in a row to reach across the hole that no one can see without magnification!!

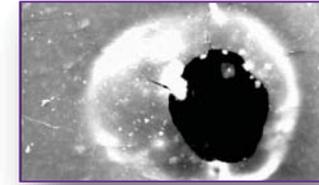
# Compare Performance to Non-woven Sterilization Wrap



- 5 double layered polypropylene<sup>1</sup> non-woven wrapped packs also tested with rigid containers
- Contents (agar plates within the packs) of all found to be sterile after the bacterial challenge and pressure changes
- Statistically, too few to be significant, but all 5 remaining sterile after the rigorous full package test is important
- Question: If a “pin-hole” occurs in non-woven wrap, will it let bacteria through like a hole in a rigid container?

1. Author communication: Confirmed non-woven was polypropylene

# Holes in Wrap Compared to Rigid Containers



Bacteria go right through holes/cracks in containers; nothing to stop them  
But not through polypropylene non-woven wrap. Why?

## Three reasons:

1. Thousands of microscopic fibers make up multiple layers of particle traps: let air through, but trap bacteria: tortuous pathway like a complex maze
2. Each fiber is electret treated making it charged in order to attract & trap any bacteria trying to penetrate the fabric
3. In some, tortuous pathway & electret property maintained during transport/storage: with PowerGuard\* technology



“Surround” Full Tray Protection

# Holes in Wrap Compared to Rigid Containers



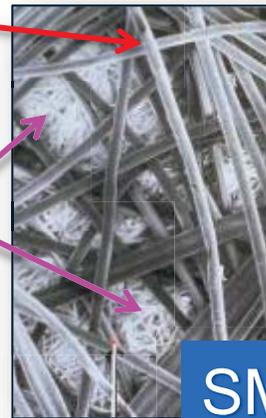
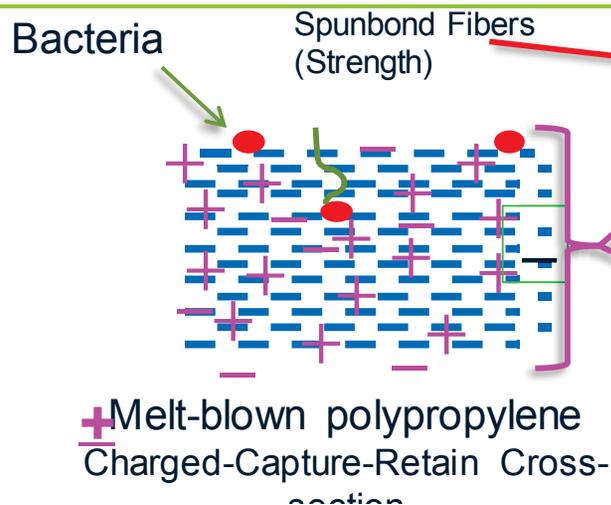
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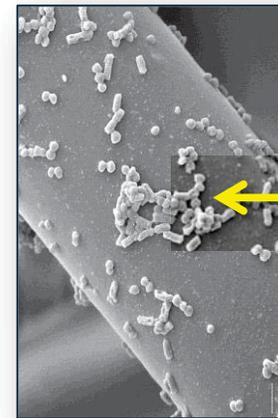
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“Surround” Full Tray Protection



SMS

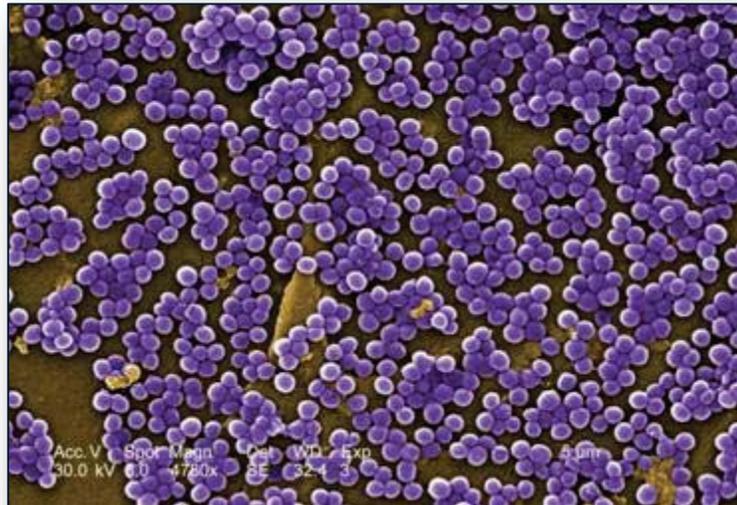


Bacteria Captured on charged fiber & retained: Power-Guard\* technology

# Summary & Conclusions

- In this study, 216 rigid sterilization containers obtained from in-use inventory of 4 hospitals were visually inspected and deemed appropriate for maintaining sterility.
- However, the majority of containers failed to prevent recontamination after sterilization when subjected to bacterial aerosols under changes in atmospheric pressure.
- 5 wrapped non-woven packages tested did preserve sterility
- We cannot assume passing visual inspection is a guarantee against sterility failure.
- **Dunkelberg concludes:** Rigid containers must be inspected before each use for visual damage, but should also be tested by whole container barrier integrity using varying pressure bacterial aerosol challenge annually.

# Appendix



Methicillin-resistant  
*Staphylococcus aureus* (MRSA)

# Why Pressure Variation Levels for Sterile Containers or Wrapped Packs?

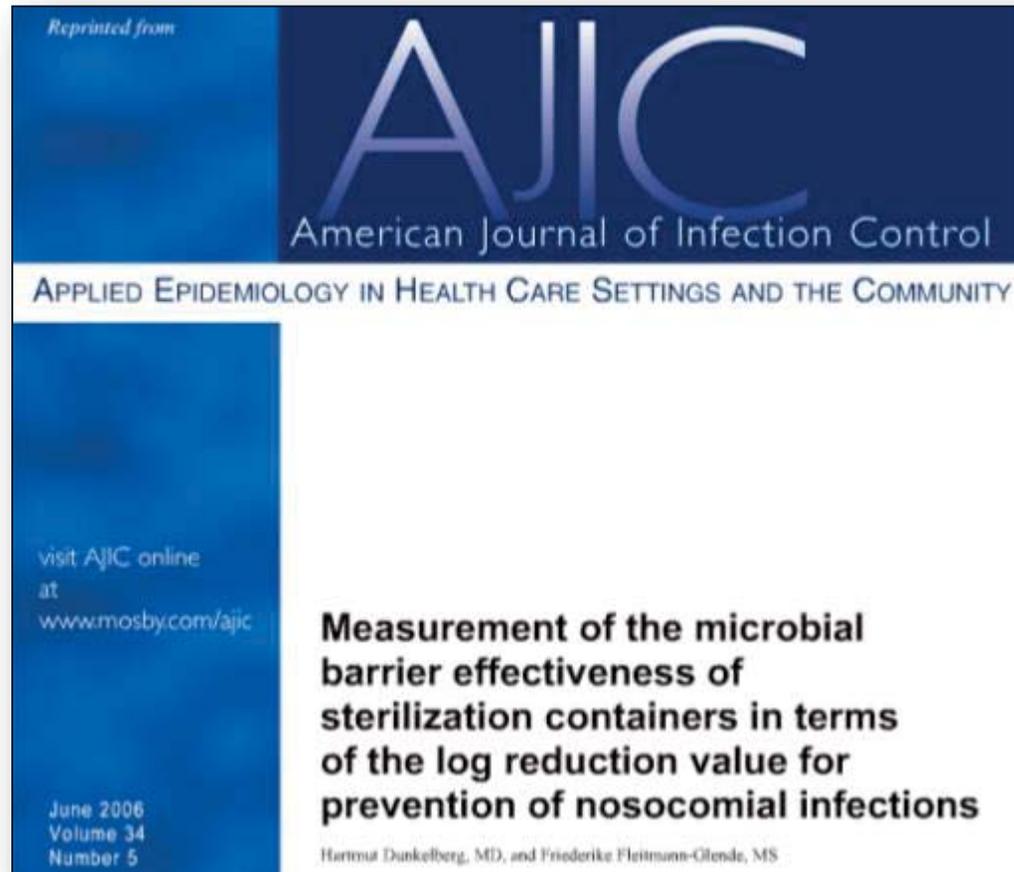


- After sterilization cycle completed, containers cool, **air from environment sucked into container** thru filter or breaches
- Most SPD in basements: As elevator goes up external pressure decreases; air pulled **out of containers/packs**
- OR ventilation is cool, positive pressure pushing air **into containers/packs through filters (or holes or cracks if any)**
- If not used, containers transported back down elevator air pressure increases outside– pushing air **into containers/packs**

## Recommended practice

- Containers may remain in sterilizer to cool with sterilizer door ajar, reducing condensation formation
- Once removed, should remain on cart in low traffic area
  - ANSI/AAMI ST79 states may take 30 minutes to 2 hours
- Do not place on cold racks until containers cooled as condensation within container may occur

# Dunkelberg Study



Study conducted by Dr. Dunkelberg. Please ask your representative for a reprint.  
This study was not funded by Kimberly-Clark.