



### 2019 April TOPIC # 3 – What gloves should I be wearing?

**You may read the full article from Jan MJA of 2015 but I have selected out the pertinent parts below for discussion**

*MJA Jan 2015*

*EXPERTS are debating the results of an Australian study, which has found that clean, non-sterile gloves are not inferior to sterile gloves in preventing wound infection after minor skin excision.*

*In a randomised controlled trial, researchers in Queensland compared the incidence of infection in 478 patients who received minor skin surgery at a primary care practice using either sterile or non-sterile gloves. [\(1\)](#)*

*The authors found that infection occurred in 9% of excisions, and that the rate of infection in the non-sterile group was not significantly different to that in the sterile gloves group.*

*They were able to perform the non-inferiority study because of known relatively high wound infection rates among patients in the practice, situated in a provincial town in Tropical North Queensland.*

*“The results of our study suggest that the use of non-sterile clean boxed gloves was not inferior to that of sterile gloves in relation to the incidence of infection.”*

*The authors said that previous evidence had shown sterile gloves were superior for more reconstructive procedures, such as skin flaps, and therefore did not recommend their findings be applied to more complicated procedures.*

*“However, the findings could be extrapolated to less complicated procedures in primary care, such as contraceptive implant insertion and minor procedures involving class 2 wounds such as suturing of lacerations”, the authors wrote.*

*The use of non-sterile versus sterile gloves also presented cost benefits, with about \$1 saved per pair of gloves used.*

*.....For minor procedures such as wound dressing, suturing and removal of minor skin lesions, RACGP advised that clean, single-use gloves were appropriate to use. However, Dr Ann Koehler, director of the Communicable Disease Control Branch at SA Health, believed the practices reported in the paper breached the National Health and Medical Research Council’s (NHMRC) Australian Guidelines for the Prevention and Control of Infection in Healthcare (2010). [\(3\)](#)*

***“[NHMRC] recommendations for surgical aseptic technique on surgical procedures, including use of sterile gloves, are stated to apply to all surgical procedures regardless of setting, including office-based practice.”***

*Dr Koehler believed the general practice featured in the study recorded an unacceptably high rate of wound infection, and that there was insufficient evidence provided to accept this was caused by Queensland’s tropical environment. “It is puzzling that with an already huge infection rate compared to the accepted levels of 1%–3%, the practice in this study is prepared to introduce yet another risk for infection; the use of non-sterile gloves.” She said there were additional advantages for GPs using sterile gloves not addressed in the research. “Sterile gloves are more comfortable, with better fit leading to increased dexterity, and are thicker, providing better protection for the health care worker should there be a needle stick injury.”*

I would have added that with more and more immunocompromised patients needing a lower infectious dose, that adherence to the guidelines offered maximum protection