CORRESPONDENCE

Incorrect representation of aseptic techniques

We read with interest the recent article by Suvikas-Peltonen *et al*¹ reviewing 26 studies of which 12 concerned incorrect practices that led to microbial contamination. Our study 'Anaesthetic drug administration as a potential contributor to healthcare-associated infections: a prospective simulation-based evaluation of aseptic techniques in the administration of anaesthetic drugs'² was one of the 12 reviewed articles. We would like to clarify three points. First, our study was carried out in a simulated operating theatre, which is not a clinic as stated in the review. Therefore, our patients were manikins and not real people—the microbiological contamination we found was grown from 5 of 38 collection bags (13%) connected to intravenous lines through which the participant anaesthetists injected the drugs. Second, we did not document multiple use of phials and ampoules as stated in the article, although we did investigate the microbiological contamination of the air in the simulated and hospital environments, which was not stated. Third, the simulated operating theatre is not a hospital ward, where 'the medicine preparation is often performed in patient rooms,

without any protective wear' as quoted in the article and in the online supplementary appendix. We believe these points misrepresent our study and we invite the authors to comment.

We have subsequently published a study conducted in the operating theatre where we detected microbiological contamination in 6.3% of 300 cases from filter units attached to the intravenous lines of real patients undergoing anaesthesia.³ We also grew bacteria from 55 of 2318 (2.4%) syringes involved.³ These findings add to data (feedback from participants) in our simulation-based study strongly suggesting that our findings in the simulator are indeed relevant to the clinical environment.

Finally, we agree with the authors that strategies to reduce potential sources of microbiological contamination during parenteral drug handling should be developed.

EAHP Statement 6: Education and Research

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