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Worsening H₁N₁ Influenza outbreak to significantly increase proven adverse effect of ED Overcrowding

The doubling of the number of new cases of "Swine flu" (Influenza H₁N₁) in the past week at a time of unprecedented numbers of patients on trolleys and chairs awaiting hospital admission in the country's Emergency Departments (EDs) is a cause for very grave concern. It is inevitable that cross infection with the H₁N₁ virus will occur in the country's overcrowded EDs where the basic facilities to isolate patients with this condition do not exist and excessive numbers of ill patients, many of whom are in the high risk groups for adverse outcomes from H₁N₁ infection, are cohorted together. This scenario will result in death and adverse outcomes for vulnerable patients, an outcome which is all the more tragic as the situation is both foreseeable and preventable.

The Association calls upon the Minister for Health and Children and the HSE to immediately mandate the removal of admitted inpatients from the country's EDs so that the risks of this and other contagious diseases are minimised. The experience of the SARS outbreak in Toronto¹ where an infected patient who had contracted SARS in Hong Kong, spread it to other patients and staff in an overcrowded ED should serve as a stark reminder of the inevitable outcome of an infectious patient being in contact with vulnerable patients as occurs when EDs are so chronically overcrowded, as they are in Ireland.

Achieving this necessary goal requires

- opening of closed hospital beds
- transferring patients to step down facilities where acute care in hospital is complete but the patient cannot return to their home (so called bed blockers or delayed discharges).
- transferring admitted inpatients to hospital wards even if this requires an additional patient or two to be placed on otherwise full wards. Although suboptimal, this scenario is proven to be significantly safer than boarding admitted inpatients in overcrowded EDs. The practice of boarding admitted patients in EDs has been proven internationally to result in unnecessary increased deaths and greater complication rates among this group of patients.
- accelerating various initiatives (e.g. the Acute Medicine Programme, provision of additional long stay beds etc.) intended to provide medium to long-term solutions.

The Association is convinced that a failure to grasp the nettle and deal with the ED overcrowding issue will result in unnecessary fatalities and adverse outcomes as the impact of Influenza H₁N₁ rapidly worsens.

Reference

 Farquharson C et al. Responding to the SARS outbreak, lessons learned in a Toronto Emergency Department. J Emerg Nursing 2003; 29: 222-8

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