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What is the right approach to infection prevention and control for children living at home with invasive devices?

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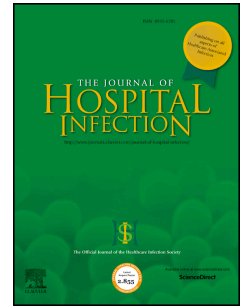
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Opinion**What is the right approach to infection prevention and control for children living at home with invasive devices?**

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Introduction

Infection prevention and control (IPC) efforts and research thus far have primarily focused on the acute care setting and on the behaviours and practices of healthcare workers, but recognition is increasingly growing that infection risks are not contained within organizational boundaries, and that many individuals who are not healthcare professionals may be involved in managing those risks. Children living long-term with invasive devices such as central lines, gastrostomy tubes, dialysis catheters, and tracheostomies are an example of a patient group that is particularly vulnerable to infection and who may be cared for primarily at home by family members.^{1,2} The number of these children appears to have increased rapidly in recent years, largely due to changing patterns of care for children, and to therapeutic advances in neonatology, oncology, cardiology, and transplant medicine (to name but a few).^{3–12} Caring for children in their own homes has significant benefits for their quality of life, but this places special demands on families, who have to deliver complex care.^{13–16}

These children have a high rate of unplanned hospital admissions for infective complications, causing disruption to the child and their families.^{17,18} Infection and its possible consequences are a source of pervasive anxiety and fear for families, given the risks associated with long-term antibiotics and vulnerability to sepsis.^{19–21} The implications for health services are also significant: it costs almost US\$70,000 to treat a central line infection in a child.^{22,23} Yet the rise of homecare for children with complex medical needs has not been accompanied by a parallel rise in the recognition of these risks, nor in the development of strategies to mitigate them.^{24–27} The ways in which families and children may best be supported in preventing and controlling infection in the community remain poorly understood.

Advances in prevention and control of healthcare-associated infections

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