American Latex Allergy Association

Instituting Latex Precautions

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With the recognition that hepatitis and HIV viruses are able to be transmitted by bodily fluids, the delivery of safe care in medical institutions changed dramatically in the mid-1980?s. In an attempt to protect workers, the concept of universal precautions was instituted. Since that time, the latex glove industry and the healthcare field has encountered a new crisis. This crisis involves sensitization to natural rubber latex protein which has affected numerous patients and healthcare workers. This has resulted in a dramatic need for another change in the care of patients as well as healthcare workers throughout the world. In order to effectively deal with a growing number of patients and healthcare providers with latex allergy, each institution must develop guidelines to reduce the risk to these subjects.

One of the most effective means of instituting safe practice has been the development of institutional task forces, or committees, that oversee issues around latex allergy. These issues include care of the individual patient, prevention of sensitization of patients at high risk of developing latex allergy, prevention of sensitization of healthcare workers, and care of the already sensitized healthcare worker. Because there is no standard documented best approach, each institution must develop their own guidelines.

The task force should be multi-disciplinary and include a mix of physicians, nursing, and other medical personnel. The doctors involved should include an allergist, surgical specialist, ambulatory, and administrative physicians. In addition, nurses from all departments must be represented. Representatives from occupational health, respiratory care, risk management, and materials management are also necessary in order to effectively carry out the tasks of this committee. Achieving excellence through team work has been quite successful in our institution and others across the country.

The Chair of the committee must be able to understand all the issues involved and coordinate multiple disciplines. The first and foremost duty of this task force is to define guidelines for the care of a latex-sensitive patient. This may include practices such as no exposure to latex from the time of birth for individuals that have spina bifida to the screening of every individual who requires surgery or procedures. Other groups at higher risk of latex allergy include those with multiple surgeries or frequent exposure in their occupational setting. In order to prevent any untoward reactions, a standard screening questionnaire is useful for patients undergoing procedures.

Identification of medical products which may cause an allergic reaction is necessary. The vast majority of reactions will occur with examination and surgical gloves and possibly intravenous systems with inline latex valves. Although many products contain natural rubber latex parts, they are rarely responsible for allergic reactions; this would include medication vial tops, mechanical ventilators, and other such equipment. Some

important devices causing reactions would include Foley catheters and latex tubing that may come in contact with mucous membranes. Each hospital should define potentially problematic products by writing to the manufacturer to obtain a product content. The committee can effect this through the Materiels Management Officer.

Even more important, the protection of healthcare workers to sensitization from latex has become the primary responsibility of these committees. They need to examine barrier protection issues and make an informed decision about exposure to potentially allergenic gloves. Low allergen gloves and gloves that are powder-free appear to be the standard to be emulated in the industry at this time. Hospitals should aggressively seek out companies who can provide these high quality gloves and institute a policy of using powder-free gloves in their facilities. Numerous reports of the allergenicity of gloves have been published. Natural rubber latex gloves should never be utilized for a patient with latex sensitivity as they may react to this substance despite the low allergen content.

In addition to these functions, quality improvement opportunities should be monitored by this group for patients and employees. All untoward events should be monitored by this committee and reported to the Food and Drug Administration. The development of this collaborative program is necessary to protect the patient and the healthcare worker.

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