

Hospital food safety measures reduce risk of contaminated hospital food

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A new study found more than 80 percent of raw chicken used in hospitals in food for patients and staff was contaminated with a form of antibiotic resistant bacteria called extended-spectrum beta-lactamase (ESBL) producing *E. coli*. While sufficient preparation eliminated the presence of bacteria, poultry meat delivered to hospital kitchens remains a potential point of entry for these dangerous bacteria into the hospital. The study was published in the April issue of *Infection Control and Hospital Epidemiology*, the journal of the Society for Healthcare Epidemiology of America.

"While a high proportion of chicken contaminated by antibiotic resistant *E. coli* is a significant concern, robust food safety measures taken by hospital kitchen staff are able to prevent the spread of these pathogens and minimize risk to food handlers, staff and patients," said Andrew Stewardson, MD, the lead author of the study.

Researchers from the University Hospital of Geneva in Switzerland collaborated with the Food Control Authority of Geneva to test [raw chicken](#) delivered to the central hospital kitchen that prepares more than 8,000 meals daily. They compared the hospital samples to food in local supermarkets for the presence of ESBLs finding that most (86%) chicken meat samples were positive. *E. coli* is a normal part of healthy human gut flora but can also cause urinary tract infections and occasionally more serious invasive infections.

The researchers also looked at how food, as a potential source of

multi-[resistant bacteria](#), impacts the health of food handlers, healthcare workers and patients. They found six of 93 food handlers were ESBL carriers, but overall were no more likely to be colonized by ESBL-producing [bacteria](#) than the Swiss population.

The authors concluded that industrial risk management strategies in the hospital kitchen appear sufficient to minimize risk to food handlers, hospital staff and patients. However they caution that this conclusion may not apply to household kitchens, where food safety precautions are less rigidly applied.

Provided by Society for Healthcare Epidemiology of America

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