



## Proof Source

# Strategies to prevent *Clostridioides difficile* infections in acute-care hospitals: 2022 Update

## SHEA/IDSA/APIC Practice Recommendations

Kociolek LK, Gerding DN, Carrico R, et al. Strategies to prevent *Clostridioides difficile* infections in acute-care hospitals: 2022 Update. *Infection Control & Hospital Epidemiology*. 2023;44(4):527-549.  
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“For the most likely proposed definition, a case of HT-CDI [healthcare facility onset, treated CDI] will be defined as any positive test for *C. difficile* on or after hospital day 4 from admission, and in whom  $\geq 5$  days of CDI treatment were given, and treatment was started within 2 calendar days of the positive *C. difficile* test. If a patient is discharged or transferred before receiving 5 days of treatment, any treatment will count.”

These recommendations are an update to the 2014 published guidelines for detecting and preventing *Clostridioides difficile* infections (CDI) in acute-care hospitals and were developed with input from:

- Society of Healthcare Epidemiology (SHEA)
- Infectious Disease Society of America (IDSA)
- Association for Professionals in Infection Control and Epidemiology (APIC)
- American Hospital Association (AHA)
- The Joint Commission (TJC)
- Centers for Disease Control and Prevention (CDC)

A significant change detailed in the updated practice recommendation is a modification to the National Healthcare Safety Network’s (NHSN) definition of CDI incidents.

Previously, NHSN defined a CDI event based on the results of the last test of record. In response, many laboratories which prefer to use a PCR assay moved it to the screening position and positioned the toxin test last. Molecular testing will often be positive when a gene is present regardless of whether the *C. difficile* organism is actively growing, producing toxin and making patients sick.

To avoid penalizing laboratories for their choice of *C. difficile* testing algorithm, the NHSN plans to update the definition of hospital-acquired CDI to include antibiotic treatment in addition to test results. While this new definition is yet to be finalized, it will likely include any positive test for *C. difficile* on or after day 4 from admission, and treatment started within 2 days of the positive test and continued for  $\geq 5$  days. The new definition will support laboratories in selecting a *C. difficile* algorithm that works best for their patient population and workflow while only reporting true CDI occurrences.

### NHSN definition of a CDI event

