

The Role of Tooth Brushing in Preventing Ventilator Acquired Pneumonia in Intubated

Children ≥ 5 Years Old

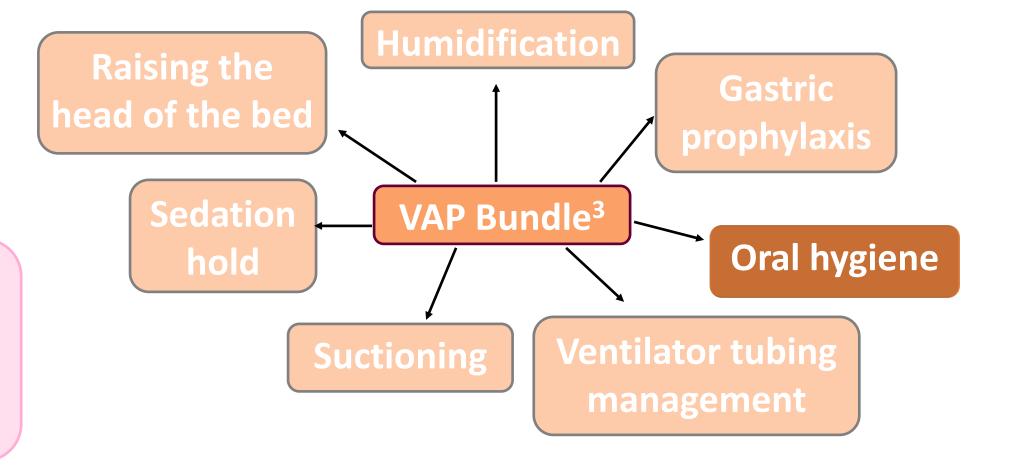
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Introduction and Aims

Ventilator Acquired Pneumonia (VAP) is the second most common Healthcare Acquired Infection (HCAI) on Paediatric Intensive Care Units (PICU)¹. VAP is linked to increased; morbidity, mortality, and costs¹. However the techniques used to prevent it are relatively inexpensive². It is recommended that care bundles are used in healthcare to instil a consistent approach to evidence based prevention of HCAI throughout an organisation³. A VAP bundle is recommended by the NHS³ and utilised in practice⁴.

Aims:

- T Explore how toothbrushing should be incorporated into our oral hygiene practices in order to prevent VAP.
- ★ Empower nurses to decrease VAP rates by reducing barriers to toothbrushing.
- **™** Effect change long term



Recommendations for Practice	Rationale
	• Children > 3 years should brush their teeth twice daily using a fluoride toothpaste ⁵
	• Patients or their carers will do this at home, and will be unable to do this for themselves whilst intubated 5,6,7
	• All interventions should be in the patient's best interests, consent should be sought when possible ⁸
	• Toothbrushing is needed to clear plaque ^{2,7,9}
	• Toothbrushing should be utilised as part of good oral care; not as useful as a stand alone intervention ¹¹
	• Preventing VAP should focus on preventing colonisation of the upper airway ^{2,12}
	• Care bundles contribute to low incidence of VAP in Europe ¹⁰
Use a cuffed ETT ^{1, 9}	• This sits at the narrowest part of the airway ¹³ to act as a physical barrier against the aspiration of secretions ^{1,6}
	 Need to be aware if it is safely inflated to prevent damage to the trachea¹⁴
acilitate further research into using toothbrushing to	• Toothbrushing in the ICU is underresearched ⁹
revent VAP in paediatrics	• There is a lack of good quality evidence surrounding the subject ² ; which is recent and specific to PICU
	• It is vital nurses act upon an evidence base ⁸
Sarriers to Toothbrushing	Solutions
Supplies are not available at the point of care 12	$ullet$ Keep supplies and guidelines at the bedside 12
	• Sponges are not as good for removing dental plaque ² ; toothbrushes needed specifically
Compliance to oral care guidance may reduce over	 Create ownership of the results by displaying progress for all to see¹
ime ¹⁵	• Focus on experiential learning ¹⁵
Oral care is perceived as being low priority ¹² especially	• Educate bedside nurses on the importance of oral care as part of HCAI prevention ³
luring periods of critical illness16	• Use anchor fasts as a more secure method of ETT strapping; so accidental extubation can be avoided ⁴
	 Include nurses regularly on reports of the impact of new interventions on the unit¹
lurses are not confident delivering oral care ⁶	• Oral care education should be included as part of induction for new nurses ¹
	• Encourage experienced nurses to educate their junior colleagues; they are more likely to perform oral care 8,15
the patient and their family 17. State of the patient and their state of the patient and the pati	nd ← Clean toothbrush & store Suction excess in an upright position 17. ← toothpaste and wipe ← teeth in a circular ← amount of fluorid

Conclusion

- Nurses require further training to learn the importance of toothbrushing in preventing VAP³.
- Training should aim to be delivered as part of continuing professional development and then supported in the longer term in order to truly effect change¹.
- Senior staff should disseminate their knowledge to improve confidence of junior colleagues^{8,15}.
- The oral care guideline should encourage a systematic approach to VAP prevention; reducing uncertainty^{2, 11}.
- **R** Bedspaces should be equipped with all necessary equipment for toothbrushing¹².
- **♥** Disseminate information on HCAI prevalence in the local PICU to create awareness¹.
- Research should focus on delivering more high quality evidence in order to reach consensus^{2,8}.

References

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