Dear Joe Bloggs,

Welcome to your Evidence Update email from KnowledgeShare. The resources listed below have been chosen based on the interests you have provided. I hope they are useful. Please contact me via email if you would like a copy of any of the journal articles. If you would like to change the interests we have listed, stop receiving the notifications, or request a search on a specific topic, please don't hesitate to let me know.

If you need help getting hold of the full text of anything here then please email me back. For more information about the KnowledgeShare Current Awareness service contact me using the details below.

David

**Acute Medicine**

**Articles**

_The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library._

**Enteral feeding for nutritional support in critically ill patients.**
[The article provides recommendations regarding nutritional support-related enteral feeding for critically ill patients, and it mentions how enteral feeding can help reduce infections and improve quality of life for the critically ill. Malnutrition risks and the length of a patient's hospital stay are addressed, along with hypermetabolism risks, nutritional screening, and patient assessment. U.S. nutrition guidelines are assessed, along with comorbidities and gastrointestinal tract function.]
_Available with an NHS OpenAthens password for eligible users_

**Getting hand hygiene right. [Editorial]**
[The article discusses environmental hygiene and infection control in hospitals. It reports that the most possible healthcare-associated infections (HCAIs) are bloodstream infections (BSIs) that occur in patients with a vascular access device, such as vascular catheter. Emphasis is given to topics such as hand hygiene, personal protective equipment, and asepsis.]
_Available with an NHS OpenAthens password for eligible users_

**Malaria: diagnosis, treatment and management of a critically ill patient.**
[Malaria is a significant cause of mortality in many countries and remains the most prevalent parasitic tropical infection. The World Health Organization estimates that 50% of the world’s population is at risk of malaria, with most deaths occurring in sub-Saharan Africa. This case study explores the management of a malaria patient admitted to a critical care unit in Zambi and will increase understanding of malaria, a condition rarely seen in UK critical care practice.]
Available with an NHS OpenAthens password for eligible users

Minimising central line-associated bloodstream infection rate in inserting central venous catheters in the adult intensive care units.
[Aims and objectives: To investigate the procedural aspects in inserting central venous catheters that minimise central line-associated bloodstream infection rates in adult intensive care units through a structured literature review.]
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Oral decontamination techniques and ventilator-associated pneumonia.
[Ventilator-associated pneumonia (VAP) is one of the major nosocomial infections in the intensive care unit (ICU), contributing to increased mortality and morbidity. Studies have shown that oral decontamination significantly reduces the incidence of VAP, but oral care practices in ICUs are not consistent. A doubleblind RCT was undertaken in the medical ICU of a tertiary care centre in India, to assess the efficacy of a toothbrush-based oral care technique in reducing incidence of VAP. ]
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Recognising the value of infection prevention and its role in addressing the antimicrobial resistance crisis. [Viewpoint]
["Although hospital epidemiology and infection prevention programmes are being tasked with more, this increase in demand has not been met with a commensurate increase in compensation or personnel. Increased surveillance and reporting requirements combined with flat or decreasing budgets creates the unintended consequence of taking the focus away from patient-focused infection prevention duties."]

Sepsis: keeping up to date. [Editorial]
[The author comments on the state of research and treatment related to sepsis, an organ dysfunction caused by infection. He discusses the challenges associated with identifying the risk of sepsis, particularly for those in nursing. Other topics covered include wound care, education, and symptoms such as altered mental state, hyperthermia, and increase heart rate.]
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Reports
The following report(s) may be of interest:

**NIHR Signal: Humidified oxygen linked to increased chest infections.**
NIHR Dissemination Centre; 2017.
[https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000467](https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000467)

[More respiratory infections in adults followed the use of humidified oxygen compared with non-humidified low-flow oxygen therapy. Bacterial contamination was common in the humidified oxygen bottles across various hospital departments including respiratory wards. UK guidelines currently recommend using non-humidified oxygen for adults requiring low-flow oxygen.]

*Freely available online*