

# Reducing Hospital-Acquired *Clostridium difficile Infections* Using a Novel Mattress Barrier: A Cost Analysis

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# Background



- *Clostridium difficile* infection (CDI) is a common healthcare-associated infection transmitted by oral fecal route.
- Despite strict cleaning guidelines, the hospital bed mattress remains an area of potential contamination.
- A launderable mattress barrier (MB), is a solution to reduce the incidence of hospital-acquired CDI (HA-CDI).

## **Project Aim**

This study compared the cost of two methods to reduce hospital-acquired *Clostridium difficile* infections (HA-CDI): the use of a mattress barrier and current mattress cleaning practice.

## Results

Key parameters' values are the following (Table 1):

- Probability of HA-CDI: 52 per 10,000 bed days.
- Reduction in HA-CDI rates attributable to mattress barrier: 50 percent.
- Inpatient care costs in the presence of HA-CDI: \$3,671 per bed day.

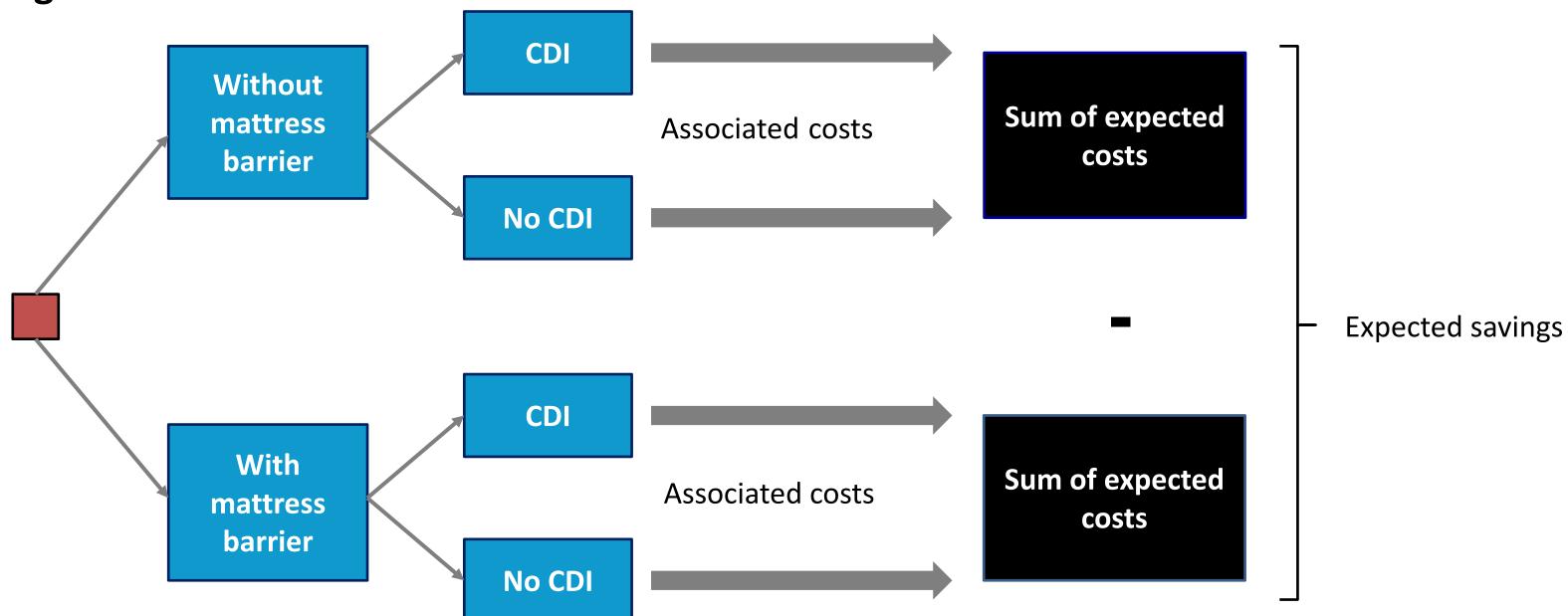
#### Table 2. Expected Costs of Mattress Barrier and Current Practice per Bed Day

Current Practice (CP)	With HA-CDI	No HA-CDI	<b>Expected Cost</b>
Probabilities	0.0052	0.9948	
Cost of inpatient stay	3,670.55	2,257.21	2,264.52
Cost of mattress	0.87	0.87	0.87
Cost of mattress skin	0.58	0.58	0.58
Cost of cleaning mattress and skin	0.46	0.42	0.42
Expected CP Cost	<b>19.24</b> <sup>a</sup>	<b>2,247.12</b> <sup>a</sup>	2,266.39 <sup>b</sup>
Mattress Barrier (MB)			
Probabilities	0.0026	0.9974	
Cost of inpatient stay	3,670.55	2,257.21	2,260.88
Cost of mattress	0.70	0.70	0.70
Cost of mattress skin	0.35	0.35	0.35
Cost of cleaning mattress and skin	0.46	0.42	0.42
Cost of buying MB	0.75	0.65	0.65
Cost of changing MB	0.45	0.39	0.39
Cost of laundering MB	1.87	1.63	1.63
Expected MB Cost	<b>9.65</b> <sup>a</sup>	<b>2,255.28</b> <sup>a</sup>	<b>2,265.02</b> <sup>b</sup>
Expected Savings			<b>1.49</b> <sup>C</sup>

## Methods

- A simulation model assumed that the mattress barrier has two main consequences for hospitals:
  - a reduction in the incidence of HA-CDI, and
  - an extension in the hospital bed mattress life.
- Clinical and cost data were obtained from the peer-reviewed literature and materials from the mattress barrier manufacturer.
- All incidence rates of HA-CDI and costs were reported per patient bed day.
- Sensitivity analyses assessed the robustness of the results to various values of the model's parameters.
- A scenario analysis examined the cost consequences of the mattress barrier in a hospital with:
  - high HA-CDI rates: at the 75<sup>th</sup> percentile
  - low HA-CDI rates: at the 25<sup>th</sup> percentile.

#### Figure 1: Model

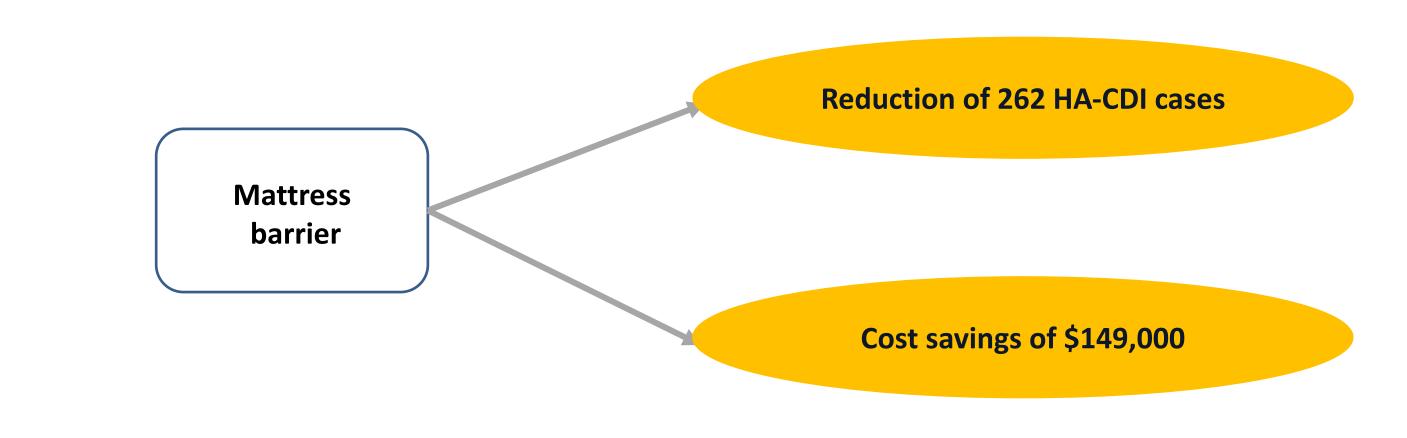


(a) Expected cost = probability x total cost

- (b) Expected cost with HA-CDI + Expected cost No HA-CDI
- (c) Expected CP cost Expected MB cost

For a typical hospital, the mattress barrier was associated with an expected average cost reduction of \$1.49 per patient bed day (Table 2).

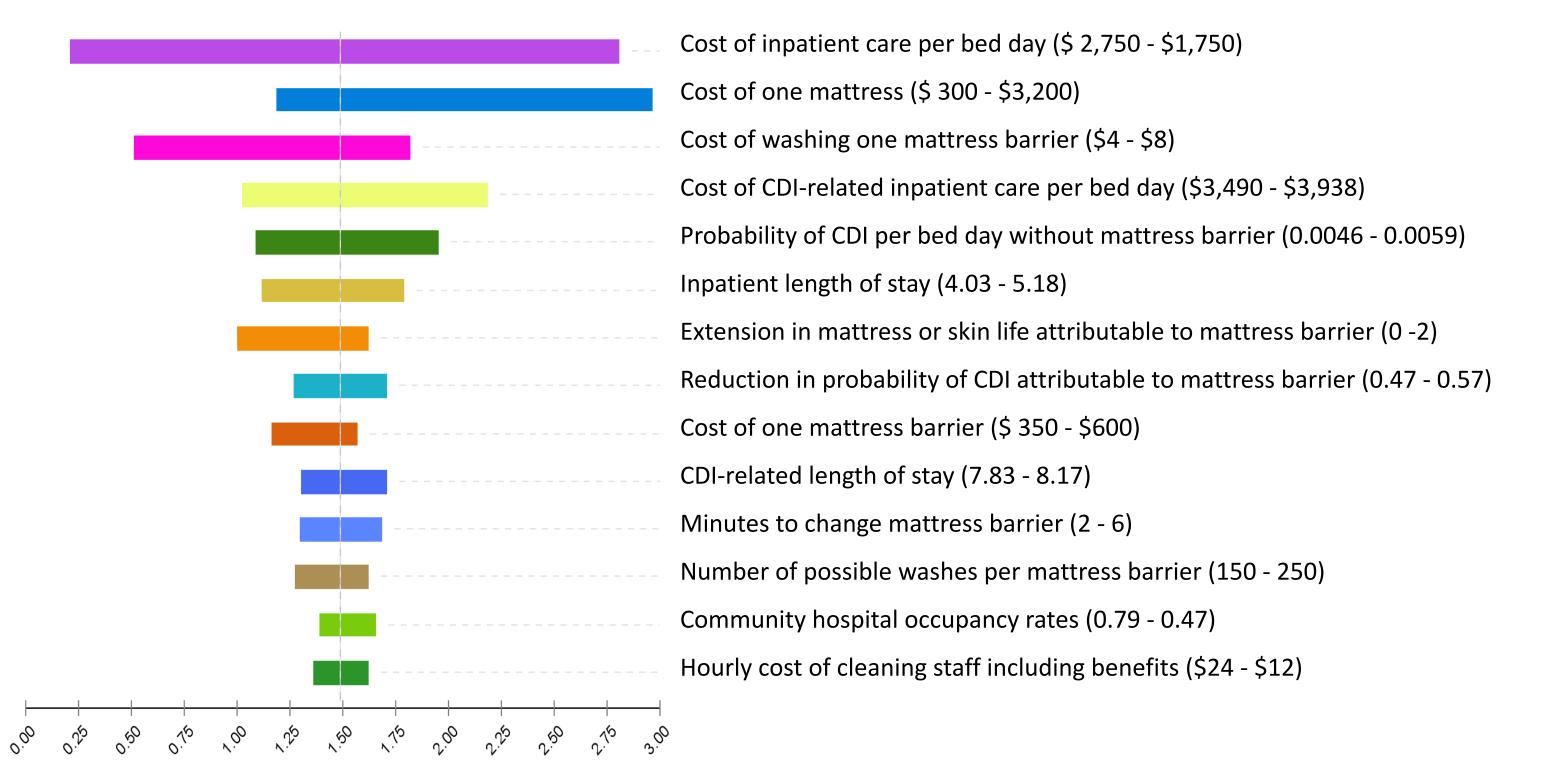
#### Figure 2: Impact of mattress barrier for a hospital with 100,000 bed days per year



#### **Table 1: Model Parameters**

Variables	Base case <sup>(a)</sup>	Range <sup>(b)</sup>	Distribution <sup>(c)</sup>
Hospital occupancy rate <sup>(1)</sup>	0.6280	0.47 - 0.79	Normal
Probabilities			
Probability CDI-related <sup>(d)</sup> bed day <sup>(2,3)</sup>	0.0052	0.0046 - 0.0059	Beta
Proportion of CDI reduction attributable to MB <sup>(4)</sup>	0.50	0.47 - 0.53	Beta
Length of stay			
CDI-related length of stay <sup>(5)</sup>	8.01	7.83 - 8.17	Gamma
Overall inpatient length of stay <sup>(3)</sup>	4.6	4.03 - 5.18	Gamma
Costs of inpatient care per bed			
CDI-related inpatient cost <sup>(5)</sup>	3671	3,490 - 3,938	Gamma
Overall inpatient cost (excluding CDI) <sup>(5,3)</sup>	2257	1,750 - 2,750	Gamma
Costs related to mattress/skin			
Cost of one mattress <sup>(7,8)</sup>	800	300 - 3,200	Gamma
Years of mattress life <sup>(9)</sup>	4	3 - 5	
Extension in mattress/skin life year(s) attributable to MB <sup>(9)</sup>	1	0 - 2	Normal
Time to clean a mattress in minutes (no CDI) <sup>(9)</sup>	5	3 - 10	•••
Time to clean a mattress in minutes after CDI <sup>(9)</sup>	10	5 - 15	•••
Cost of standard cleaning products, per discharge <sup>(10)</sup>	0.41	0.31 - 0.51	•••
Cost of enhanced cleaning product after CDI, per discharge <sup>(10)</sup>	0.69	0.52 - 0.86	•••
Costs related to mattress barrier (MB)			
Cost of one MB <sup>(9)</sup>	400	350 - 600	Gamma
Cost of labor per hour, including benefits <sup>(11)</sup>	18	12 - 24	Normal
Time to change MB in minutes <sup>(9)</sup>	4	2 -6	Normal
Cost of one MB laundry wash <sup>(9)</sup>	5	4 - 8	Gamma
Number of MB changes per CDI patient <sup>(9)</sup>	3	1 - 5	•••
Number of MB changes per non-CDI patient <sup>(9)</sup>	1.5	1 - 2	•••
Number of possible washes per cover <sup>(9)</sup>	200	150 - 250	Normal

#### Figure 3: Sensitivity Analysis



The factors impacting the most the level of cost savings are (Figure 3):

- inpatient care costs with or without HA-CDI
- cost of the mattress
- costs of cleaning the mattress barrier.
- The mattress barrier generated expected savings in 99.99% of the model iterations.

#### Figure 4: Scenario analysis for a hospital with 100,000 bed days per year

Low CDI-rate hospital

Mattress barrier Increased costs of \$49,000

(a) All costs reported per patient bed day and in 2016 prices.

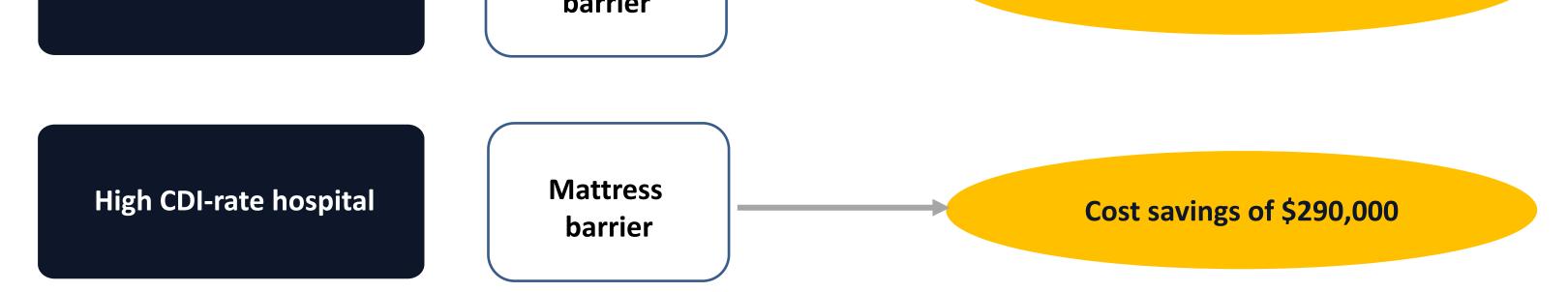
(b) The range represents the 95% confidence interval when available, or ±25% of the base case value. Deterministic sensitivity analysis conducted on each range.

(c) Shape of distribution selected based on best practice. When the distribution is provided, the parameter was entered into the probabilistic sensitivity analysis. If not provided, the deterministic sensitivity analysis show**ed** that the parameter's values had no impact on the results. In that case, that parameter was not part of the probabilistic sensitivity analysis.

(d) There is no distinction between hospital and community acquired CDI in the model parameters.

# References

- 1. Clostridium difficile infections (CDI) in Healthcare California Health and Human Services Open Data Portal [Internet]. [cited 2018 Jul 1]. Available from: https://data.chhs.ca.gov/dataset/clostridium-difficile-infections-cdi-in-healthcare.
- Lessa FC, Mu Y, Bamberg WM, Beldavs ZG, Dumyati GK, Dunn JR, et al. Burden of Clostridium difficile Infection in the United States. N Engl J Med. 2015 Feb 25;372(9):825–34.
- 3. HCUP-US Home Page [Internet]. [cited 2018 Sep 27]. Available from: https://www.hcup-us.ahrq.gov/.
- 4. Hooker EA, Bochan M, Reiff TT, Blackwell C, Webb KW, Hart KW. Decreasing Clostridium difficile Healthcare Associated Infections through Use of a Launderable Mattress Cover. Am J Infect Control. 2015 Dec 1;43(12):1326–30.
- 5. Zhang S, Palazuelos-Munoz S, Balsells EM, Nair H, Chit A, Kyaw MH. Cost of hospital management of Clostridium difficile infection in United States-a meta-analysis and modelling study. BMC Infect Dis. 2016 Aug 25;16(1):447.
- 6. Hill-Rom | Enhancing outcomes for patients and their caregivers [Internet]. [cited 2018 Sep 27]. Available from: https://www.hill-rom.com/usa/.
- 7.Stryker Medical Devices and Equipment Manufacturing Company | Stryker [Internet]. [cited 2018 Sep 27]. Available from: https://www.stryker.com/us/en/index.html.
- 8. Trinity Guardion Launderable Hospital Mattress Cover [Internet]. [cited 2018 Sep 27]. Available from: http://trinityguardion.com/.
- 9. Slayton RB, Scott RD, Baggs J, Lessa FC, McDonald LC, Jernigan JA. The Cost–Benefit of Federal Investment in Preventing Clostridium difficile Infections through the Use of a Multifaceted Infection Control and Antimicrobial Stewardship Program. Infect Control Hosp Epidemiol. 2015 Jun;36(06):681–7.
- 10.U.S. Bureau of Labor Statistics [Internet]. [cited 2018 Sep 27]. Available from: https://www.bls.gov/. 11.Centers for Disease Control and Prevention (2016) at https://www.cdc.gov/nchs/data/hus/2016/089.pdf.



### Conclusion

- The use of a mattress barrier was expected to be a cost reduction measure for most hospitals.
- The savings resulted mainly from the reduction in the HA-CDI rates.
- A mattress barrier is an intervention that
  - does not require changes in cleaning or other hospital protocols, contrary to other CDI interventions
  - may be a comparatively simple solution to reduce HA-CDI for hospitals.

# Next Steps

#### Further investigations could help determine whether a mattress barrier would:

- reduce other hospital-acquired infections
- be cost-effective from a societal perspective.

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