The European Commission sent a series of recommendations on 15 December to national governments in a bid to improve the safety of patients and to reduce the millions of hospital acquired infections each year.

The Stockholm based European Centre for Disease Prevention and Control says that one in 20 hospital patients in Europe—some four million people—become infected while in hospital. Such infections are estimated to be the direct cause of 37 000 deaths annually and to be a contributory factor in a further 110 000.

Besides common micro-organisms such as the resistant strain of meticillin resistant *Staphylococcus aureus* (MRSA), the commonest types of hospital acquired infection are those of the urinary tract (27%), lower respiratory tract (24%), surgical sites (17%), and bloodstream (11%).

Drawing attention to the subject, the European Union’s health commissioner, Androulla Vassiliou, said, "Patient safety is the cornerstone of good quality health care. I would like to see a Europe for patients where safety is paramount and citizens are confident and knowledgeable about the care they receive."

The commission points to studies indicating that 20-30% of nosocomial infections can be prevented and that the measures are highly cost effective. It is urging governments to put in place a comprehensive national strategy to reduce the incidence of these infections, such as by developing guidelines on issues such as hand hygiene and the screening of patients and ensuring that infection prevention and control measures are sufficiently resourced.

The commission is also recommending that effective detection and reporting systems be put in place and that all healthcare employees be given better education and training on the risks involved. It emphasises the need for clear information for patients and adequate explanations to people who are infected of the nature of and reasons for the treatment being given.

Two years after they have adopted the commission’s recommendations governments will have to report back on the measures they have taken and their effect. The policy paper does not ask national authorities to detail infection rates at individual hospitals, but Mrs Vassiliou made it clear that she would like to see more data on the scale of the problem.

"We are encouraging member states to give more information on incidents, but it is up to them to organise their systems," she said.
The commission has also drawn attention to the financial cost of healthcare acquired infections. Given, on average, the cost of a hospital bed of €334 (£300; $460) per day and a prolonged stay of four days to recover from the infection, it calculates that the extra burden on European healthcare systems amounts to some €5.5bn a year.

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The recommendations are in the *Green Paper on the EU Workforce for Health* at http://ec.europa.eu/health/ph_systems/workforce_en.htm