Capsule

Ed Krisiunas

WNWN International, Burlington, Connecticut

What’s new? What’s hot? What’s timely? If you don’t have time to search the Internet for the latest developments that might impact your work environment, you just might find some of this information in the “Capsule” column. Please e-mail any comments or suggestions to ekrisiunas@aol.com or to Co-Editor Barbara Johnson at barbara_johnson@verizon.net or Co-Editor Karen B. Byers at karen_byers@dfci.harvard.edu.

Framework for Leadership and Training of Biosafety Level 4 Laboratory Workers

Construction of several new Biosafety Level 4 (BSL-4) laboratories and expansion of existing operations have created an increased international demand for well-trained staff and facility leaders. In response to this challenge, the BSL-4 laboratory directors from most existing North American laboratories and those currently under construction met to develop a framework of standards and norms necessary for training future maximum-containment laboratory scientists and support staff. The results of those deliberations are available at the link below and offered as a model for the global BSL-4 laboratory community.


New cases of CJD associated with dural grafts continue to be reported in Japan, and Lyodura grafts remain the most likely vehicle for transmission. Similar to other allogeneic dura mater grafts, Lyodura grafts were derived from cadaveric dura mater and used by surgeons for soft-tissue reconstruction of damaged, missing, or impaired tissues (primarily dura mater). According to the manufacturer, the grafts were gradually absorbed in situ, colonized by fibroblasts and stem cells, and eventually replaced by endogenous connective tissue.

This report updates previous reports and summarizes the investigation of all 132 cases to date linked to dural grafts. The results suggest that, because of the long incubation period between graft receipt and symptom onset (possibly >24.8 years), continued surveillance in Japan might identify additional CJD cases associated with dural grafts. An electronic version is available at: www.cdc.gov/mmwr/preview/mmwrhtml/mm5742a3.htm

NIOSH Publication No. 2009-106: Personal Protective Equipment for Health Care Workers Who Work with Hazardous Drugs

There is much interest in the management of hazardous drugs in health care facilities. Health care workers who handle hazardous drugs are at risk for skin rashes, cancer, and reproductive disorders. NIOSH recommends that employers provide appropriate personal protective equipment (PPE) to protect workers who handle hazardous drugs in the workplace.

The electronic version of a recent publication regarding which PPE should be used when working with hazardous drugs is available at: www.cdc.gov/niosh/docs/wp-solutions/2009-106/

CDC Disease Profile Report

The CDC announced that the 2006 report from the National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention (NCHHSTP) is available at: www.cdc.gov/nchhstp/Publications/docs/2006_Disease_Profile_508_FINAL.pdf

To help reduce the occurrence of these diseases, CDC is analyzing data across disease centers to show that certain populations are particularly vulnerable to the overlapping occurrence of these diseases. The study provides an important update of this public health crisis. In addition, the figures on Hepatitis and HIV may be used to update bloodborne pathogen training programs.