Procedures for cleaning and decontaminating surgical instruments must be changed if the risk of variant Creutzfeldt Jakob disease (vCJD) infection is to be reduced, theatre nurses were told last week.

In a stark warning, Donald Jeffries, professor of virology at Barts and the London NHS Trust, said current methods are ineffective. ‘We are going to look at the decontamination system in the context of vCJD and we may need to introduce some changes,’ Professor Jeffries told the Association for Perioperative Practice’s annual congress in Harrogate.

Millions have been exposed

He said millions of people in the UK have been exposed to the disease but there is no way of knowing how many might succumb to it. Professor Jeffries claimed that although the number of confirmed cases was relatively small – 157 in the UK – 14,000 more could surface over the next 40 years.

The figures are based on a study of tissue samples taken during 12,600 tonsillectomy and appendicectomy operations. Three of the samples contained the abnormal prion proteins that cause the human form of bovine spongiform encephalitis (BSE). Professor Jeffries said millions of people in the UK had been exposed to the prions, which entered the food chain after cattle were fed infected animal products.

The centralisation of hospitals’ sterile supply departments has ensured that procedures are carried out properly. However, the protein dries out on the way to sterilisation, which makes it almost impossible to remove, he explained.

Courses on cultural diversity can lead to nurses stereotyping patients from different cultures, a diversity expert warned theatre nurses last week.

RCN head of equality and diversity Wendy Irwin said stereotyping is as damaging as pretending that everyone is the same. ‘Often nurses who have been on courses on cultural competence talk about other cultures in terms of “they do this” or “they do that”,’ Ms Irwin said.

Speaking at the Association for Perioperative Practice congress in Harrogate, she said this could have a negative effect on health outcomes. ‘We end up with stereotypes that can be damaging and lead to less positive health outcomes.’

She said the golden rules to ensure all encounters with patients are culturally sensitive are to treat everyone as they would like to be treated and to ask if you do not know something. ‘When you are involved in a cross-cultural encounter you need to observe, listen and enquire,’ Ms Irwin said.