# Use of a Trained Canine to Detect Clostridioides difficile in the **Hospital Environment**

Rachael Harrison, MD 2390 Hemby Lane Greenville, NC 27834

Email: harrisonra19@ecu.edu Office: (252) 744-4500

Fax: (252) 744-5713

R Harrison, L Pittman, K Pittman, P Cook Division of Infectious Diseases, Brody School of Medicine at East Carolina University, Greenville, NC

#### 1. Introduction

Clostridiodes difficile infection (CDI) is the most common nosocomial infection in this country. We know spores contribute to spread of infection. How do we know that all the C. difficile spores have been eradicated after a patient's room is cleaned? Currently we have no validated method.

Current literature has demonstrated that canines have high levels of sensitivity and specificity for detecting the odor produced by C. difficile and its spores.

### 2. Methods

# Harley's training:

- Included positive and negative culture plates containing *C. difficile*.
- When 2 years old she was taught by a professional trainer to sit when she detected C. difficile and to not sit when C. difficile was not found. She was rewarded with treats when C. difficile was found.
- She was able to identify positive stool samples with near 100% accuracy.

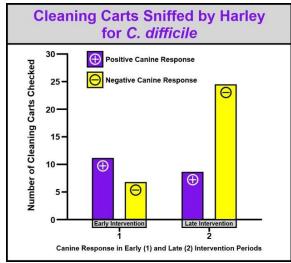
## Harley in the hospital setting:

Once proficient, Harley was used to sniff rooms at Vidant Medical Center occupied by, or previously occupied by, patients with CDI as well as cleaning carts.

## Early intervention: October to January 2019

- Number of carts sniffed positive and negative by Harley were measured.
- The cleaning staff were instructed on how to clean their carts with bleach wipes.





# Late intervention: February to March 2020

- Again, the number of carts sniffed positive and negative by Harley were measured.
- A Fisher's exact test was used to determine differences between early and late testing.

The study was approved by the Animal use and Care Committee at ECU.

#### 3. Results

- Harley detected C. difficile in 51% (24/45) of rooms inhabited with patients positive for CDI. Harley detected C. difficile (or its spores) in 46% (13/28) of rooms previously inhabited by patients with CDI.
- We observed a statistically significant decline in positive carts and an increase in negative carts during the late intervention period (p = 0.017).
- Harley did not detect C. difficile in any positive areas after they had been cleaned with bleach wipes.

#### 4. Conclusions

- Hospital cleaning carts are commonly contaminated with *C. difficile* spores.
- Training a canine to detect *C. difficile* and its spores is an effective means of detecting the organism in the hospital environment.
- Use of a trained canine is appears to be effective in validating the cleaning process of rooms that have been previously occupied by patients with CDI.

# 5. References

1. M Bomers, M Agtmael, H Luik, MVeen, C Vanderbroucke, YSmulders "Using a dog's olfactory sensitivity to identify C. difficile in stools and patients: proof of concept study" BMJ 2012;345:e7396

2. CDC "C.diff Guidelines and Prevention Resources" 3. "C. difficile Canine Scent Detection at Vancouver Coastal Health" - www.vch.ca/your-care/your-safety-privacy/infection-