HIV and AIDS - infection control in hospitals

HIV stands for human immunodeficiency virus – the virus that can cause acquired immune deficiency syndrome (AIDS) if left untreated. HIV is a blood borne virus (BBV) that is carried in the blood, semen, vaginal fluids and breast milk of a person who has the infection.

Hospitals follow strict infection control guidelines to prevent the spread of HIV and other infections, to patients, staff and visitors. This includes disposing of needles and syringes after one use, sterilising reusable instruments after every use and the use of personal protective equipment such as gloves and eye protection during procedures involving blood and body fluids.

How HIV is spread

HIV can be spread through:

- Unprotected anal or vaginal sex (without a condom) with a person who has HIV. Unprotected oral sex is very low risk for the transmission of HIV.
- Sharing needles, syringes and other injecting equipment with a person who has HIV.
- From mother to child during pregnancy, childbirth or through breastfeeding if the mother is HIV positive.

How HIV is not spread

Although there may be patients with HIV or AIDS in hospitals, you cannot catch HIV from:

- Toilet seats or bathrooms
- Food
- Cutlery or crockery
- Air – HIV cannot be spread through the air.

The risk of HIV from blood transfusions is extremely small

Since March 1985, all blood transfusions have been screened for HIV (in Australia). People at risk of HIV infection are excluded from donating blood.

Every unit of donated blood is comprehensively screened for a wide range of blood borne infections, including HIV. The test that checks for the presence of HIV antibodies has been supplemented, since July 2000, by the nucleic acid test (NAT). Rather than just checking for antibodies (the body's response to infection), NAT looks for viral nucleic acid (the presence of the virus itself).

The 'window period' – the time between infection and the detection of the virus in the blood – is reduced from around 22 days to11 days with this sophisticated technology. NAT is also used to screen donated blood for hepatitis C.

Because of these tests, the risk of becoming infected with HIV from a blood transfusion is extremely small.

Hospital policies protect you from HIV and AIDS

To prevent the spread of HIV, strict infection control guidelines are followed in hospitals. All blood and body fluids are treated as potentially infectious:

- Syringes and needles are used once only and disposed of into special 'sharps' containers.
- Reusable instruments are cleaned and sterilised after every use.
- Many items are disposed of after single use.
- Healthcare workers wear protective attire including gowns, gloves and eyewear when carrying out procedures involving blood and body fluids.
- Spilt blood and body fluids are cleaned up according to strict procedures.
- Laundry is cleaned according to strict infection control procedures.

The risk to hospital workers

Hospital workers can become infected with HIV if they accidentally prick themselves with a needle or other sharp instrument contaminated with HIV. However, only a very small number of hospital workers around the world have become infected with HIV in this way.

Preventative treatment is available for workers who have accidentally pricked themselves with a needle or other sharp instrument contaminated with HIV. Preventive treatment may prevent the HIV getting into the bloodstream.

If a hospital worker has HIV or AIDS

Even if a hospital worker has HIV, there are strict infection guidelines that protect you as the patient. You cannot become infected with HIV through:

- Casual contact, such as shaking hands
- Being washed
- Having your dressing changed
- Receiving an injection.

Protecting hospital staff from HIV

If a hospital staff member has an accident involving your blood, you may be asked to allow the hospital to test your blood for HIV, hepatitis C or hepatitis B. Hospitals treat all blood and body fluids as potentially infectious. By testing your blood, the hospital will know whether the worker has been previously exposed to HIV and should start preventive treatment known as post-exposure prophylaxis (PEP).

PEP is the administration of antiretroviral HIV drugs commenced within 72 hours of a significant exposure to HIV. PEP has been shown to significantly reduce the risk of HIV infection following needlestick injuries to healthcare workers.

Where to get help

- Your Occupational Health and Safety officer or staff health clinic (if you are a healthcare worker)
- Your doctor
- Melbourne Sexual Health Centre Tel. (03) 9341 6200 or 1800 032 017 or TTY (for the hearing impaired) (03) 9347 8619
- Communicable Disease Control, Department of Health, Victoria Tel. 1300 651 160

Things to remember

- You cannot catch HIV or AIDS from hospital toilets, crockery or casual contact.
- Hospitals adhere to strict infection guidelines to prevent the spread of HIV.
- The risk of catching HIV from blood transfusions is extremely small.

This page has been produced in consultation with, and approved by:

Melbourne Sexual Health Centre