

# O, safety, quo vadis?

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## Abstract

It is widely acknowledged that resolutions of difficulties tend to engender new problems. Increasingly, complex systems perpetuate increasing complexity. This discursive essay suggests that the most promising of discoveries, innovations, and inventions are impuissant to obviate once and for all the need for vigilance. For example, the pursuit of safety and prevention of contagion has burdened our societies with a variety of consequential expenses and environmental pollution. How reassuringly might infection control be achieved depends on the human element – on how attentively, thoughtfully are we as individuals able to meet challenges. The questions to be asked in solving any problem are: how much will a given solution cost and how reliable is it?

**Keywords:** Safety, Contagion, Infection control, Cost, Environmental pollution, Human element

Readers of *Medical Writing* would agree that ritual played prominently during the shamanistic-religious era of medicine. Perhaps less obvious is that ritualistic behaviours insinuate themselves even in contemporary scientific, evidence-based medical care – for lack of more sustainable alternatives, to indulge in the compulsion to appear militant in the face of peril, or for the sake of PC (procedural and political correctness) – and, with dismaying regularity, mindlessly.

I had repeatedly observed our surgery clinic nurses disinfecting a room after a procedure. One day, however, I became aware of an oddity in the process, and reached a dispiriting conclusion: the spectre of futility cannot completely be banished from our doings; we will *never* have absolute safety. Hands gloved, the nurses would spray disinfectants, and wipe surfaces clean (and, one hoped, bacteriologically safe) – performing more or less as they had been trained to. But then, still gloved, they would gather soiled linen and instruments, exit the room, and pull the door shut. In final analysis, the greatest protection they had provided was for themselves; yet even that not thoroughly, because later they would open the same door, turning the invisibly contaminated handle, but this time without gloves on.

The solution of a problem often delivers other problems. As our ideas of allopathy (other-caused illness) have evolved so have our efforts to prevent contagion: public and personal hygiene, quarantine, isolation, sterile technique, antisepsis, inoculation, etc. But it was the emergence of the scourges of HIV and AIDS that underlies the mannerisms and rituals that we display nowadays to protect one another from each other's pathogens. The result is costly, both economically and environmentally.

Sidestepping the politically loaded notion that our fears and needs have been opportunities for industries to emerge and thrive in previously unpredictable arenas, let us briefly (informally, non-exhaustively) list the burdens of our not unfounded, but perhaps inflated, fear of contagion. (For brevity, I address only the hazard of infection.) These can be broken down into *economic costs*, both individual and public, and *environmental costs* (think green) of the various defensive measures we have adopted, expecting in turn provision of *individual protection* or *universal protection* – sometimes both equally, sometimes more of one than the other, and certainly not thoroughly all of the time. (Purists would be correct pointing out that widespread individual protection ushers in universal protection.)

Our contemporary/Western approaches to the potential of infection are associated with increased costs (materials and labour) that are passed down to us in the overall cost of healthcare and increased environmental effluent.

- So many individuals in any sort of function that entails frequent contact with the public (e.g. grocery store clerks) unnecessarily and in a copycat manner have taken to using disposable gloves and changing them frequently, even when not required to do so in their work.
- The increased use of gloves has increased the incidence of latex allergies – giving rise to a new industry to produce and market latex-free gloves.
  - Disposable gloves then require disposal as waste.
- Sightings of the use of facemasks by the public are increasing. Often this usage is unnecessary

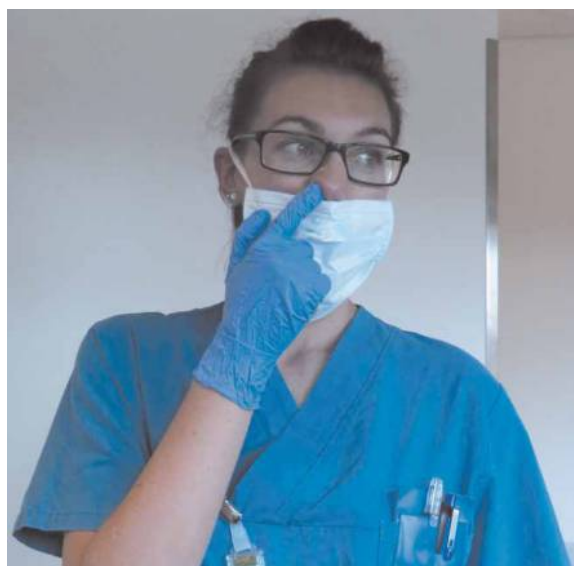
and an affectation that reflects extremist reactions to theoretic hazard.

- Facemasks eventually require disposal.
- Paper towels are being used to grab handles of WC doors from inside before exiting – which means trees must be cut to produce the paper towels, which become trash.
- The disinfectants and hand cleansers used institutionally, and now increasingly by individuals, contain chemicals, which cannot but enter the environment with as-yet-unknown effects.
  - Not unrelated to such practices is the imminence of pathogens resistant to the compounds, or of human allergies to the chemicals.
- There are, also, the costs of (a) determining the magnitude of a particular infective threat, (b) drawing up policy to deal with it, and (c) implementing preventive measures – not the least through educational programmes.

The list could go on, and the collateral burdens of others of our evolving safety-seeking habits could be treated similarly.

George Monbiot (published frequently in *The Guardian Weekly*) often writes on population growth, environment, the environmental consequences of our increasingly materialist and consumerist habits, and related topics, and he concludes that to help save the environment (and ourselves) we must change our habits and expectations. But he is realistic and alludes (mainly alludes) to the futility of such well-intentioned and hopeful prescriptions.

Despite time spent in training, our nurses were (they likely still are) unaware that they had turned scientifically reasonable prescription into mindless ritual. With contagion in mind, a similar judgement could be made about airport security procedures: (a) Take-off your shoes! And never mind that in passing you'll pick up some germs off the floors of airports. (b) Have the contents of your carryon luggage hand examined by an inspector who, between penetrating inside one valise and the next one, does not change gloves (not voluntarily, at least).



Given the human element lurking inexorably in the background, that the incidence of infections is not higher speaks not for the efficiency and efficacy of safety procedures, but more reassuringly for the resilience of the human body and its inherent, though not inexhaustible or infrangible, capacity to fight off pathogens. Yet ironically, it is also the human element that prevents a definitive dismissal of the notion that prescribed, but often ritualized, safety measures may at the end be futile, because our professional and personal lives, increasingly complex and demanding, influence our focus and dedication. We are increasingly overloaded (and distracted) with information that stoke fears, by regulations, by prescribed formal procedures, by personal needs or desires for pleasures. We are burdened by time limits and expectations of optimal productivity.

Without safety policies and procedures we would be worse off. But we should not be deluded into believing that they can or will fully allay our fears, ever. At the end, when we consider safety, we must ask not only what safety is and how to achieve it, but also the following: Ah, Safety, whither goes thou? At what cost? Is your safety net safe?

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## Author information

Jack Aslanian is a graduate of Carleton College and The University of Chicago Pritzker School of Medicine. He has divided time between decreasing amounts of clinical practice and increasing amounts of writing and medical editing. His English translations of the poetry of Paruir Sevak were published in Armenia in January 2011.