



Biofilms in endoscopes - an unseen treat. Best practice in stopping infection transmission through flexible endoscopes.

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What are biofilms?

- ✓Attached and/or interconnected formation
- ✓Microbial origin
- ✓ Cells embedded in a matrix
- ✓Appearance and gene expression are different from free cells of same species











Biofilms – more than just slime

- ✓Biofilm has **QUALITIES** which individual bacteria or simple colonies don't have **QUORUM SENSING**.
- ✓ Biofilm is both a living thing and an environment
- ✓Biofilm has internal channels circulatory system for uptake of nutrients and the removal of waste
- ✓Microbes in a biofilm are 1000-1500 times more resistant to antibiotics than in their free state
- ✓ Microbes in a biofilm communicate and exchange genes
- ✓ Biofilms compete for space and resources











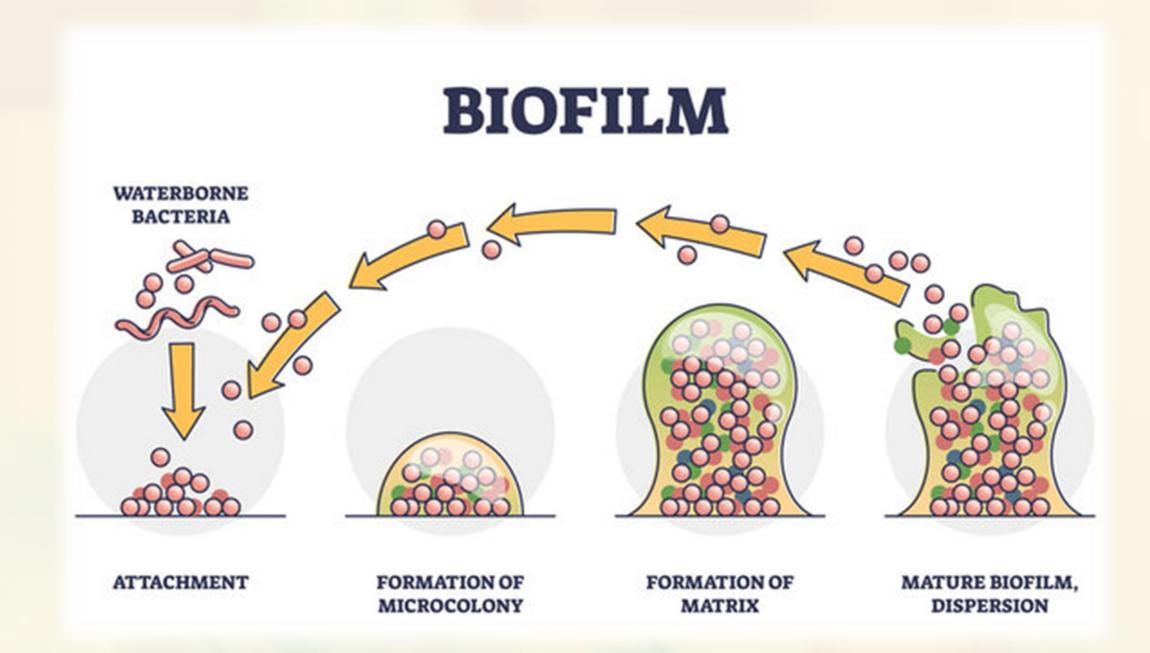






Life of a biofilm

- ✓Requires surface, water, food
- ✓ Founding bacteria permanently attach to a substrate
- ✓ Community grows and develops 3D structures
- ✓Once matured sheds bacteria into environment colonising new sites













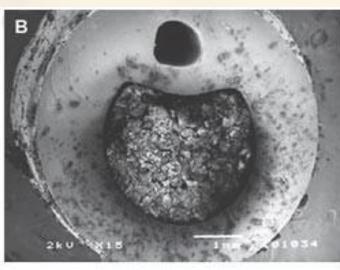
Biofilms in human body

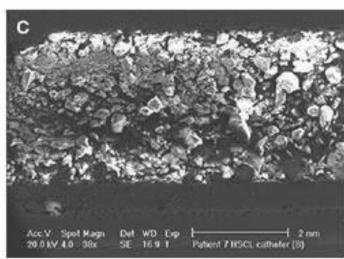
- ✓ Every exposed (semi-critical) surface can be colonised by biofilms
- ✓65% 80 % of all human infectious diseases are caused by biofilm bacteria.
- ✓Biofilm formation has been associated with infection of all types of implantable medical devices
- ✓ Biofilm bacteria are major contributors to endoscope associated infections.
- ✓ Experimental evidence of biofilms causing GI cancers
- ✓FDA demands that pre-market submissions of medical devices must include anti-biofilm strategies.

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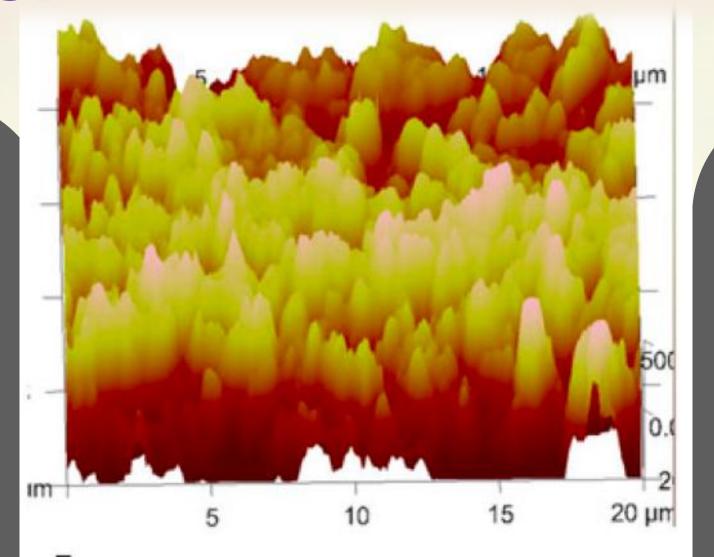


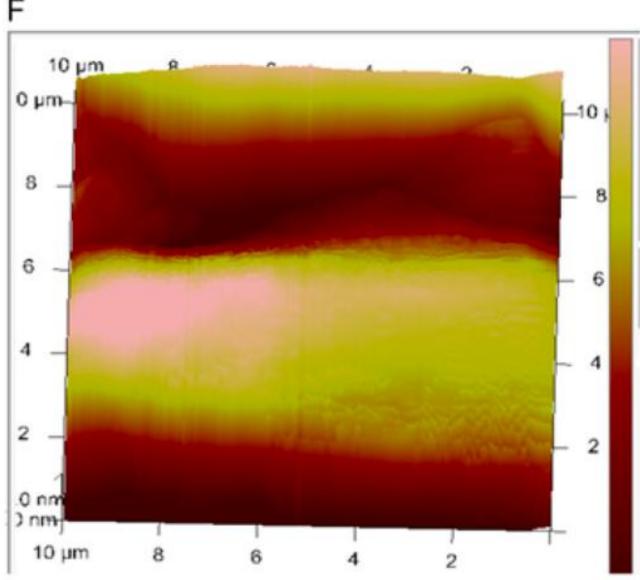
Biofilms in the body and on the instruments Are they different?



Traditional biofilm (TB)

- ✓ Develops in the body, in the water lines, in the decontamination equipment, etc.
- ✓ Thick slimy substance, rough surface, dispenses individual bacteria and biofilm fragments
- ✓Easier to remove





Cyclic build-up biofilm (CBB)

- ✓In Endoscope and Instruments lumens
- ✓ Develops due to cyclical exposure to wet and dry phases during usage and reprocessing
- ✓ Dry surface biofilm is a reservoir for transmission of pathogens in health care
- ✓Smooth surface, produces flakes
- ✓ Harder to remove

o biofilm and traditional biofilm: The impact of friction, and 2020;41(2):172-180. doi:10.1017/ice.2019.306







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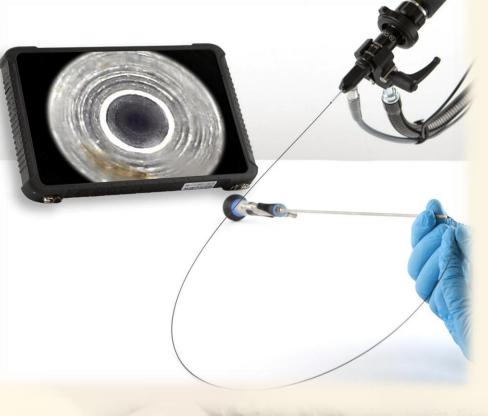
Inspecting instruments for biofilms

- ✓ Biofilms are macroscopic (large) objects
- ✓ No microscope needed, but detection can be difficult
- Can be transparent
- *Tend to colonise lumens and hard to access surfaces such as

box joints

- ✓ How to detect?
- *Borescope inspection
- Protein/ATP tests
- ***UV** fluorescence
- *DNA sequencing
- *Microbiological tests
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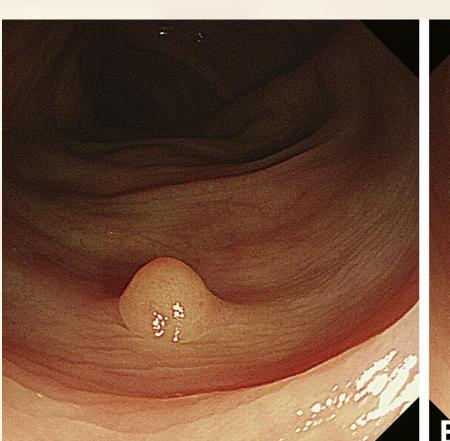


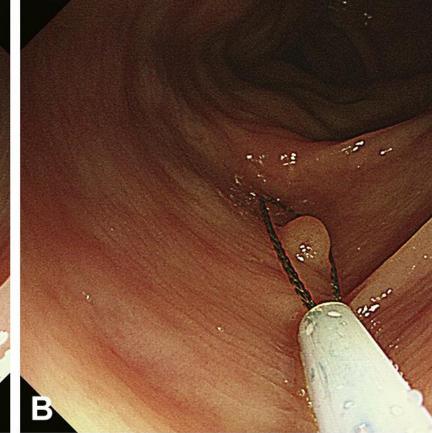


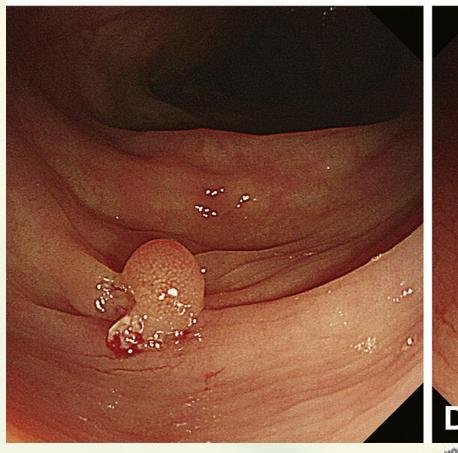
Interventional endoscopic procedures

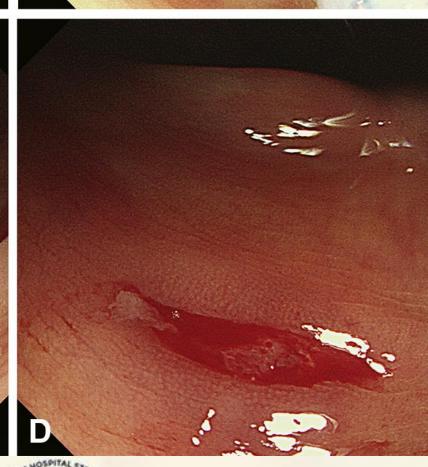
- ✓Snare polypectomy one of the first invasive endoscopic procedures developed in 1969-1971
- ✓ Many more procedures developed over the years
- ✓ Endoscopic instruments damage mucosal membranes and cross into sterile tissues
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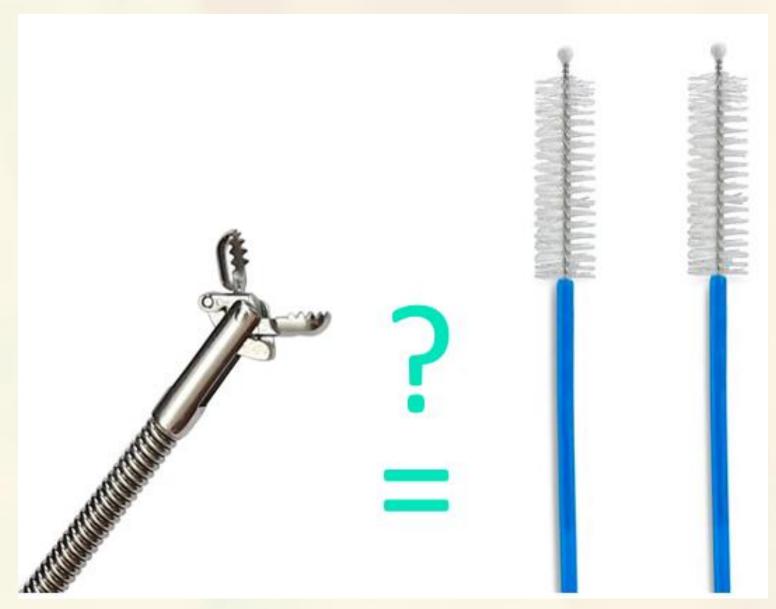
Endoscopic Instruments

- ✓ Critical medical devices
- ✓ Single use
- ✓ Purchased sterile
- ✓ Not reprocessed

Potential problems

- ✓Tight fit
- ✓ Squeezing through long, narrow lumens
- ✓Instruments can dislodge contamination from lumens and inadvertently introduce it into procedure site







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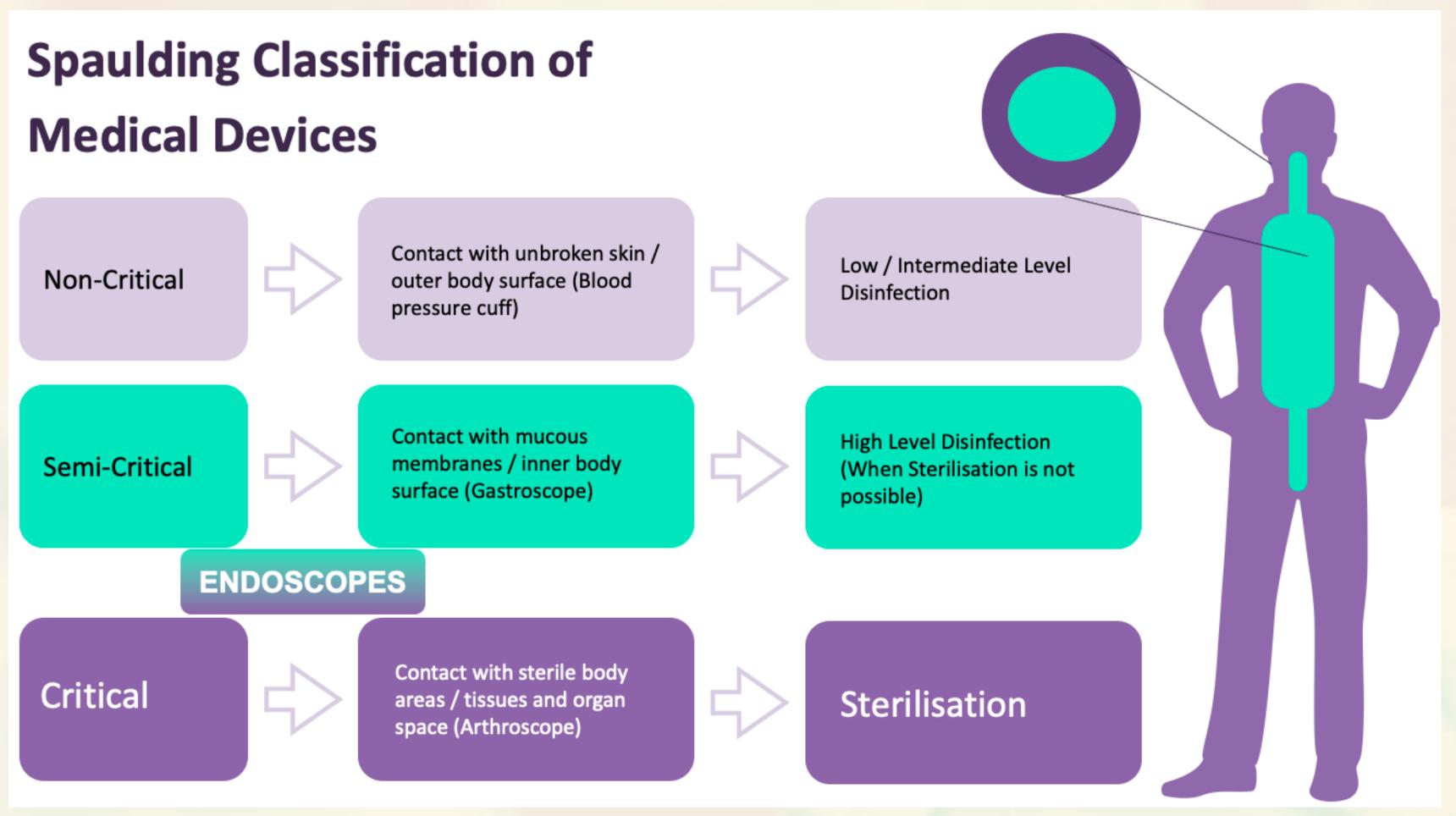




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Best practice in endoscope reprocessing

- ✓Immediate bedside clean
- ✓Transport to dedicated decontamination area
- ✓ Leak test
- ✓ Manual wash
- ✓ Automated wash
- ✓ Automated High Level Disinfection
- ✓Use in 3 hours or store in drying cabinets/vacuum systems
- ✓Optional hydrogen peroxide sterilization
- ✓ Every scope is tracked through it's use and decontamination
- All equipment validated to ISO Standards
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What is high level disinfection?

There are survivors in HLD

- ✓ High-level disinfection is complete elimination of all microorganisms in or on an instrument, except for small numbers of bacterial spores.
- ✓The FDA definition of high-level disinfection is a sterilant
 used for a shorter contact time to achieve a 6-log10 kill of
 an appropriate Mycobacterium species.
- ✓ Efficiency of HLD depends on level of initial contamination and successful cleaning











Sometimes the best practice is not enough

✓ Some microorganisms will survive disinfection especially in biofilms

✓Lower safety margin compared to sterilization

✓ Impossible to remove established biofilm from endoscopes by following

manufacturer's reprocessing guidelines





Gastrointestinal Endoscopy



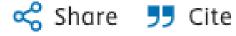


Original article
Clinical endoscopy

A quarantine process for the resolution of duodenoscope-associated transmission of multidrug-resistant *Escherichia coli*

Andrew S. Ross MD ¹ Andrew S. Ross MD ¹

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How do we get rid of biofilms?

- √Use of non-adhesive materials
- ✓Mechanical action in cleaning
- √Careful inspection
- ✓Sterilisation whenever possible
- √Single use instruments?











References



Goswami, A. G., Basu, S., Banerjee, T., & Shukla, V. K. (2023). Biofilm and wound healing: from bench to bedside. *European journal of medical research*, 28(1), 157. https://doi.org/10.1186/s40001-023-01121-7

Perry, E. K., & Tan, M. W. (2023). Bacterial biofilms in the human body: prevalence and impacts on health and disease. Frontiers in cellular and infection microbiology, 13, 1237164. https://doi.org/10.3389/fcimb.2023.1237164

Sen, C. K., Roy, S., Mathew-Steiner, S. S., & Gordillo, G. M. (2021). Biofilm Management in Wound Care. Plastic and reconstructive surgery, 148(2), 275e–288e. https://doi.org/10.1097/PRS.0000000000008142

Stickler, D. Bacterial biofilms in patients with indwelling urinary catheters. *Nat Rev Urol* **5**, 598–608 (2008). https://doi.org/10.1038/ncpuro1231

Ribeiro MM, Graziano KU, Olson N, França R, Alfa MJ. The polytetrafluoroethylene (PTFE) channel model of cyclic-buildup biofilm and traditional biofilm: The impact of friction, and detergent on cleaning and subsequent high-level disinfection. Infection Control & Hospital Epidemiology. 2020;41(2):172-180. https://doi.org/10.1017/ice.2019.306

Keswani R. N. (2020). Cold Snare Polypectomy: Techniques and Applications.

Clinical gastroenterology and hepatology: the official clinical practice journal of the American Gastroenterological Association, 18(1), 42–44. https://doi.org/10.1016/j.cgh.2019.05.052

Ross, A. S., Baliga, C., Verma, P., Duchin, J., & Gluck, M. (2015). A quarantine process for the resolution of duodenoscopeassociated transmission of multidrug-resistant Escherichia coli. Gastrointestinal endoscopy, 82(3), 477–483.

Global Guidelines for the Prevention of Surgical Site Infection. Geneva: World Health Organization; 2018. Table 3.3.3, Spaulding classification of equipment decontamination. Available from: https://www.ede.gov/infectionscontrol/pdf/guidelines/disinfection-guidelines-H.pdf

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