

Role of Handwashing and Hand Sanitising in Preventing Infection

V Sri Sreshtaa

Saveetha Dental College and Hospitals
Saveetha institute of Medical and Technical Sciences,
Saveetha university
Chennai 77
India.

Mail id : 151801093.sdc@saveetha.com

Mobile no : 9087363146

Dr.R.V Geetha

Associate Professor,
Department of microbiology,
Saveetha Dental college and Hospitals
Saveetha institute of Medical and Technical Sciences,
Saveetha university
Chennai 77
India.

Mail id : geetha@saveetha.com

Phone no: 9710456203

Dr. Anjaneyulu K

Reader,
Department of conservative dentistry and endodontics
Saveetha Dental college and Hospitals
Saveetha institute of Medical and Technical Sciences,
Saveetha university
Chennai 77
India.

Email id : Kanjaneeyulu.sdc@saveetha.com

Phone no : 9566151527

Corresponding author

Dr R V Geetha
Associate Professor,
Department of microbiology,
Saveetha Dental college and Hospitals
Saveetha institute of Medical and Technical Sciences,
Saveetha university

Chennai 77

India.

Mail id : geetha@saveetha.com

Phone no: 9710456203

ABSTRACT

Health care associated infections are now drawing attention from patients, insurers, governments, health care personnels and regulatory bodies to prevent spread of infection by direct or indirect contact. This is not only due to the range of problems in terms of the related morbidity and mortality, the cost of treatment, but also due to the recognition that most of these can be prevented. The medical community is witnessing unprecedented advancements in understanding pathophysiology of infectious diseases and the global spread of multidrug resistant infections in health care set-ups and among the public. These factors, compounded by the availability of new antimicrobials have necessitated a re-look into the role of basic practices of infection prevention in modern day health care. There is clear evidence that strict protocol to hand hygiene practices reduces the risk of cross-transmission of infections. “Clean Care is Safer Care”, a prime agenda of the global initiative of WHO on patient safety programmes, it is time the developing countries formulate the required policies for implementation of infection prevention practices in health care set-ups. This review focuses on one of the simplest and basic, low cost but yet the least accepted from infection prevention: hand hygiene.

Keywords: Alcohol-based hand rubs; compliance; hand hygiene; hand sanitisers; hand washing; infection control

INTRODUCTION

Nosocomial infections are easily acquired infections through direct or indirect contact. Most common mode of spread by hand on article contamination (Jumaa, 2005) The importance of hand hygiene practices are emphasised to prevent the spread of infection. Bacteria, virus, other microorganisms predominantly present on hands which is a major cause of 90% of the infections. (Longtin *et al.*, 2011) Hand washing with soap or an alcohol based hand - wash kills germs. This is a common and effective method of preventing infections. It is necessary to create Awareness among doctors, health workers, paramedics personnels. (Thampi, Villeneuve and Longtin, 2019) Hand sanitising is a waterless method of killing germs. As common infectious spread through hand, direct - contact or indirect by article contamination, hand hygiene importance comes into play. Hand hygiene practices are effective in reducing the risk of infection. (Smiline, Vijayashree and Paramasivam, 2018) (Ashwin and Muralidharan, 2015) (Marickar, Geetha and Neelakantan, 2014). Hand-washing helps reduce microorganisms from hands, preventing their transfer. Microorganisms thrive and multiply on human hands,

creating a pathway to infect others or the host by spread by means of contact. Hand-washing reduces the number of microorganisms on the skin surface. Since hands cannot be sterilised, most organisms can be removed by 30 seconds of effective scrubbing with soap and water. Proper scrubbing includes vigorous motion with the hands rubbing together and fingers working in between the finger web space, including the dorsal and ventral surfaces of the hands. (Girija, Jayaseelan and Arumugam, 2018; Priyadharsini *et al.*, 2018a; Girija *et al.*, 2019; Girija, Priyadharsini and Paramasivam, 2019).

It would help fulfil the deficit of people who are unaware of the importance of hand hygiene or people who do not- practice hygiene measurements. It would bring about awareness especially in the rural sector. The chance of spread of disease is fastened and contagious with improper hygiene practices. The significance of the study is to correlate it with the current situation of the covid -19 outbreak, where globally people are asked to follow hygiene and safety measures. This situation has brought about awareness in proper hygiene practices, which is being expected to follow always. The rural sector, sanitary workers are also not aware of the importance and consequences of hand hygiene practices. (Jackson, 2011; Jenkins, 2011; Wilfinger, 2011; McCalla, Thomas and Reilly, 2014)

Our team has rich experience in research and we have collaborated with numerous authors over various topics in the past decade (Ariga *et al.*, 2018; Basha, Ganapathy and Venugopalan, 2018; Hannah *et al.*, 2018; Hussainy *et al.*, 2018; Jeevanandan and Govindaraju, 2018; Kannan and Venugopalan, 2018; Kumar and Antony, 2018; Manohar and Sharma, 2018; Menon *et al.*, 2018; Nandakumar and Nasim, 2018; Nandhini, Babu and Mohanraj, 2018; Ravinthar and Jayalakshmi, 2018; Seppan *et al.*, 2018; Teja, Ramesh and Priya, 2018; Duraisamy *et al.*, 2019; Gheena and Ezhilarasan, 2019; Hema Shree *et al.*, 2019; Rajakeerthi and Ms, 2019; Rajendran *et al.*, 2019; Sekar *et al.*, 2019; Sharma *et al.*, 2019; Siddique *et al.*, 2019; Janani, Palanivelu and Sandhya, 2020; Johnson *et al.*, 2020; Jose, Ajitha and Subbaiyan, 2020).

Aim of the study is to make every citizen aware and practice proper hand hygiene to prevent cross infectious and reduce risk of disease spread directly or by article contamination.

METHODOLOGY:

Articles related to topics like- hand hygiene, Methodology, infection control, types of hand Sanitising, clinical significance, consequences, prevention, awareness related articles were searched are thoroughly analysed and discussed in detail accurately and articles related to the topic were collected, analysed and a detailed study was done. Articles emphasising on the topics mentioned were given more attention to and analysed. The inclusion criteria for the study includes all studies including articles and literature regarding the importance of hand hygiene, its effectiveness in prevention of infection spread, consequences of improper hygiene practices and

infection - control methods . The exclusion criteria for the study includes hand hygiene methods than hand hygiene, Irrelevant data - disease spread, poor hand hygiene .

Hand hygiene

Hand hygiene is an easy and simple method, yet the most important way to prevent the spread/transmission of infection. Hand hygiene can be practiced with warm water and liquid soap/soap bars (for cleaning soiled hands), warm water and alcohol containing solution (prior to invasive procedures or after contact with patients or infective materials) or by using a hand sanitiser or a handrub. Hand hygiene is a primary measure for reducing the risk of transmitting infection among patients, public and health care personnel. Hand hygiene methods include the use of alcohol-based hand rubs or hand sanitizers (containing 60%–95% alcohol) and hand washing with soap and water for an effective 20 seconds (Damani, 2011; Savage and Steverman, 2011; Sax, Allegranzi and Pittet, 2017; Mabry, 2019). Hand hygiene is regarded as one of the most important elements of infection control methods. In the wake of healthcare associated infections (HCAIs), the increasing severity of illness and complexity of treatment, superimposed by multi-drug resistant (MDR) pathogen infections, health care practitioners (HCPs) are reversing back to the basics of infection prevention by simple measures like hand hygiene. (McGuckin *et al.*, 2006).

Longtin Y in 2011 emphasised on the correct - hand hygiene and hand drying methods. Another Study by Jumaa PA *et al* shows the compliance to hand hygiene by simple and complex methods. A similar study by Packer LJ in 1999 shows the methodology of frequency, duration, effect to practise hand hygiene.

Infection control

Bacteria cause around 90% of the infections , with the remaining 10% through fungus and viruses. Some of the commonly responsible bacteria include :Staphylococcus aureus, Escherichia coli, Enterococci, Pseudomonas aeruginosa. Bacteria, viruses and fungi spread predominantly through person-to-person(direct) contact which can include unclean hands, handling contaminated articles , and other hospital equipment.(Paramasivam, Vijayashree Priyadharsini and Raghunandhakumar, 2020). Cross contamination/infection transmission occurs through a multi-step process. Organisms are present either on skin, or inanimate objects,organisms are then transferred to the hands of other people or objects . The organisms survive on skin for several minutes, improper or absent hand hygiene causes the organisms to remain in direct contact with a patient enabling transmission and infection spread. Simply washing hands or using an alcohol rub immediately after picking up the organisms would prevent their ability to survive on the skin and be passed on to someone. (Priyadharsini *et al.*, 2018b; Girija *et al.*, 2019)(Shahzan *et al.*, 2019).The most common means all of the spread of infection- cross infection, primarily practised in health care settings . This was suggested in a study by Allengrazi B, 2009 . Another

study by Bolon M shows the infection compliance in hospitals and the system reinforced to incorporate disease management. A similar study by noble WC, 1975 shows that microorganisms on the skin are the major cause and communal method of disease transmission by either direct or Indirect - contact. Most staphylococcal, streptococcus infections are spread by means of hands direct contact. (Pratha, Ashwatha Pratha and Geetha, 2017)(Shahana and Muralidharan, 2016)(M, Geetha and Thangavelu, 2019)

Hand Sanitising

Hand sanitizers are available in a liquid, gel, or foam form and are used to reduce infectious agents on the hands. Care should be taken as they are flammable and can cause injuries. (T, Geetha and Thangavelu, 2019). Alcohol-based hand sanitizer works against a wide range of microorganisms but does not act against spores. Compounds such as glycerol may be added to prevent drying of the skin. Some versions contain fragrances; however, these are discouraged due to the risk of allergic reactions. Hand sanitizer that contains at least 60% alcohol or containing a "persistent antiseptic" should be used. Alcohol based hand rubs kill various kinds of bacteria, including antibiotic resistant bacteria and TB bacteria. They also kill many kinds of viruses, including the flu virus, the common cold virus, coronaviruses, and HIV. (Voss and Widmer, 1997; Pugliese and Favero, 2000; Rahman and Chattopadhyay, 2000). Waterless hand sanitizer or hand rubs provide advantages over hand washing with soap and water. However, they are not reliable if organic matter like dirt, food, or other material is visible on the hands. Benefits of waterless hand cleaning methods include : They consume less time than hand washing, acts faster to kill microorganisms on hands , reduce bacterial counts on hands, do not promote antimicrobial resistance, are less irritating to skin than soap and water, some can even improve condition of skin (Wenzel and Pfaller, 1991). A study by Babeluk R in 2011 gives a detailed analysis of hand sanitisers a waterless method of hand hygiene practice which includes liquids, hand sprays, hand-rubs, which can be gels and can be perfumed or non - perfumed . Another study by Hillburn in 2003, shows the Antimicrobial efficacy of all alcohol based hand sanitisers which can kill most germs and is an effective, compatible method. A similar study by P Liu, 2010 shows the efficacy of liquid - sterillium on perfumed alcohol based hand rubs, hand sanitisers or gels.

Clinical significance

Washing hands with soap and water removes substantially more disease causing organisms than washing hands with water alone. People who find soap causing skin irritation, it is important to note that soaps can have a different pH – they may be neutral, slightly alkaline or slightly acidic, and perfumes in soap can also cause irritation. Changing soaps may help people know what suits their skin best. (Allegranzi and Pittet, 2007, 2009; Allegranzi, Nejad and Pittet, 2017; Vermeil *et al.*, 2019). Proper hand washing is the first line of defence against the spread of many infections

— from common cold to more serious infections, such as meningitis , bronchitis , flu, Hepatitis A and many types of diarrhoea. Hand washing removes visible dirt from hands and helps deduct the number of harmful microorganisms (germs). Harmful bacteria and viruses such as campylobacter, hepatitis A, Shigella, E. coli and Salmonella can be carried by people, animals or equipment and transmitted to food. (Wattal and Khardori, 2013). A study by Argon D in 2005 tells the efficiency, importance and life saving features of practicing hand hygiene. Some of the infection spread, especially by hand can be fatal also. Another study by Evans JR in 2005 tells that by maintaining proper hygiene and educating every citizen a healthy , reduced disease spread population and a healthy environment for survival can be achieved. A similar study by Gould DJ on Routine hygiene practices and lifestyle changes states that the reason for improper hand hygiene Practices to lead to infections is that hands are the most frequently used to touch eyes, nose, mouth which Is the main entry point for most of the disease causing agents.

Consequences

About 80% of common infections are spread by hands . Washing your hands at least 7 Times a day has been known to significantly decrease the frequency of colds, influenza and other infections .Some types of microbes that can be spread on hands, especially health- care settings, hands of health care staff - Staphylococcus aureus (including MRSA), Streptococcus pyogenes (Group A Strep), Vancomycin-resistant Enterococcus (VRE), Klebsiella, Enterobacter, Pseudomonas, Clostridium difficile Candida, Rotavirus, Adenovirus, Hepatitis A virus Norovirus (Mathai *et al.*, 2011) About 1, 5000 bacteria live on each square Centimetre of skin on one hand . Most-prone Infection carrying areas of hands are underneath the fingernails, between the fingers. While sneezing and coughing help to spread silliness , poor hand hygiene technique are a big culprit as well. Common respiratory illnesses are caused by poor hygiene including common cold , influenza, chicken pox, meningitis. Impetigo is a highly contagious skin infection that is common in children. E. Coli infections, gastrointestinal infections, allergies , nausea and rhinitis can also occur. Certain severe bacterial and viral infections can also occur and some might be fatal as well . (Watkins, 2016)(&na; and &NA;, 2001)(Vaishali and Geetha, 2018)

Prevention of diseases

Clean hands are the only protection against an infection. Washing hands thoroughly with water and soap several times per day helps fight infections. Thorough soap wash removes virus and bacteria, and they get eliminated with hand disinfection. One method cannot be replaced by the other , they must be used together for optimum efficacy. A study by Wendt in 2001 - emphasis on hand hygiene protocol, frequency and infection prevention measures in health care Settings. Practicing hand hygiene is a simple yet effective way to prevent infections . Cleaning your hands can prevent the spread of germs, including those resistant to antibiotics are becoming impossible and difficult to treat. WHO guidelines for infection prevention by hand hygiene. for health care

workers: hand wash before touching a patient, before aseptic procedures, after body fluid exposure, after touching patient after touching patient surround(World Health Organization, 2009; Ellingson, 2017).Hand washing with soap and water , or Alcohol based hand sanitation techniques are extremely effective . Teaching people about hand washing helps them and their communities to stay healthy in the following ways : reduces diarrhoea illness by 58%, Reduces respiratory illnesses by 16- 21%, Reduces absenteeism due to gastrointestinal illness in school children by 29- 57%. Prevention of sickness, reduces the amount of antibiotics and the likelihood that antibiotic resistance will develop. Frequent hand washing can prevent overuse of antibiotics . (Mcguire-Wolfe, 2017)(Spinazzè, Cattaneo and Cavallo, 2020)Our institution is passionate about high quality evidence based research and has excelled in various fields ((Pc, Marimuthu and Devadoss, 2018; Ramesh *et al.*, 2018; Vijayashree Priyadharsini, Smiline Girija and Paramasivam, 2018; Ezhilarasan, Apoorva and Ashok Vardhan, 2019; Ramadurai *et al.*, 2019; Sridharan *et al.*, 2019; Vijayashree Priyadharsini, 2019; Chandrasekar *et al.*, 2020; Mathew *et al.*, 2020; R *et al.*, 2020; Samuel, 2021)

Awareness

Awareness of hand hygiene includes the knowledge and understanding of the public , health care workers regarding the consequences and diseases that can spread through improper hand hygiene. Awareness campaigns have taken the initiative to improve the critical importance in maintaining a healthy environment. A study by Testlya A in 2020 shows the awareness levels created by the hygiene rule imposition by the government due to the current covid-19 situation. A study by T wise in 2020, elaborates on the knowledge, advertisements and educating public including all age groups to be aware and educated regarding the importance of hand hygiene . Another study by R Pandey in 2020 focuses on washkaro NCP - rural awareness programmes on Public health safety measurements. Awareness includes the levels of education of gains in hospital settings, duration and frequency of hand washing , correct methodology for hand washing and hand drying, awareness of the consequences. Hand hygiene campaigns , advertisements and programmes can be conducted. (Girija As and Priyadharsini J, 2019)

CONCLUSION

“Clean care is a safer care” Hand-washing and hand hygiene practices must be made an educational priority . Emphasis on hand hygiene importance is a basic simple protocol that-must be followed to tackle antibiotic resistant microbes. Infection prevention is an: essential method to save lives and make the environment healthy . These habits are the role models for the future - doctors , nurses , paramedical personnels, public must be property educated and hygiene practices must be followed to ensure a healthy and safe- disease free environment. The objective of the review is to emphasise that washing hands properly can help prevent the spread of the germs (like bacteria and viruses) that cause gastrointestinal and respiratory infections which can

cause serious complications, especially for young children, the elderly, or those with a weakened immune system.

REFERENCES

1. Allegranzi, B., Nejad, S. B. and Pittet, D. (2017) 'The Burden of Healthcare-Associated Infection', *Hand Hygiene*, pp. 1–7. doi: 10.1002/9781118846810.ch1.
2. Allegranzi, B. and Pittet, D. (2007) 'Healthcare-Associated Infection in Developing Countries: Simple Solutions to Meet Complex Challenges', *Infection Control & Hospital Epidemiology*, pp. 1323–1327. doi: 10.1086/521656.
3. Allegranzi, B. and Pittet, D. (2009) 'Role of hand hygiene in healthcare-associated infection prevention', *Journal of Hospital Infection*, pp. 305–315. doi: 10.1016/j.jhin.2009.04.019.
4. Ariga, P. *et al.* (2018) 'Determination of correlation of width of Maxillary Anterior Teeth using Extraoral and Intraoral Factors in Indian Population: A systematic review', *World journal of dentistry*, 9(1), pp. 68–75.
5. Ashwin, K. S. and Muralidharan, N. P. (2015) 'Vancomycin-resistant enterococcus (VRE) vs Methicillin-resistant Staphylococcus Aureus (MRSA)', *Indian Journal of Medical Microbiology*, p. 166. doi: 10.4103/0255-0857.150976.
6. Basha, F. Y. S., Ganapathy, D. and Venugopalan, S. (2018) 'Oral hygiene status among pregnant women', *Journal of advanced pharmaceutical technology & research*, 11(7), p. 3099.
7. Chandrasekar, R. *et al.* (2020) 'Development and validation of a formula for objective assessment of cervical vertebral bone age', *Progress in orthodontics*, 21(1), p. 38.
8. Damani, N. (2011) 'Hand hygiene', *Manual of Infection Prevention and Control*, pp. 135–146. doi: 10.1093/acprof:oso/9780199698356.003.0008.
9. Duraisamy, R. *et al.* (2019) 'Compatibility of Nonoriginal Abutments With Implants: Evaluation of Microgap at the Implant-Abutment Interface, With Original and Nonoriginal Abutments', *Implant dentistry*, 28(3), pp. 289–295.
10. Ellingson, K. (2017) 'Hand Hygiene Promotion from the US Perspective: Putting WHO and CDC Guidelines into Practice', *Hand Hygiene*, pp. 221–229. doi: 10.1002/9781118846810.ch32.
11. Ezhilarasan, D., Apoorva, V. S. and Ashok Vardhan, N. (2019) 'Syzygium cumini extract induced reactive oxygen species-mediated apoptosis in human oral squamous carcinoma cells', *Journal of oral pathology & medicine: official publication of the International Association of Oral Pathologists and the American Academy of Oral Pathology*, 48(2), pp. 115–121.
12. Gheena, S. and Ezhilarasan, D. (2019) 'Syringic acid triggers reactive oxygen species-mediated cytotoxicity in HepG2 cells', *Human & experimental toxicology*, 38(6), pp. 694–702.
13. Girija, A. S. S. *et al.* (2019) 'Plasmid-encoded resistance to

- trimethoprim/sulfamethoxazole mediated by *dfrA1*, *dfrA5*, *sul1* and *sul2* among *Acinetobacter baumannii* isolated from urine samples of patients with severe urinary tract infection', *Journal of Global Antimicrobial Resistance*, pp. 145–146. doi: 10.1016/j.jgar.2019.04.001.
14. Girija As, S. and Priyadharsini J, V. (2019) 'CLSI based antibiogram profile and the detection of MDR and XDR strains of isolated from urine samples', *Medical journal of the Islamic Republic of Iran*, 33, p. 3.
15. Girija, S. A., Priyadharsini, J. V. and Paramasivam, A. (2019) 'Prevalence of carbapenem-hydrolyzing OXA-type β -lactamases among *Acinetobacter baumannii* in patients with severe urinary tract infection', *Acta Microbiologica et Immunologica Hungarica*, pp. 1–7. doi: 10.1556/030.66.2019.030.
16. Girija, S. A. S., Jayaseelan, V. P. and Arumugam, P. (2018) 'Prevalence of VIM- and GIM-producing *Acinetobacter baumannii* from patients with severe urinary tract infection', *Acta Microbiologica et Immunologica Hungarica*, pp. 539–550. doi: 10.1556/030.65.2018.038.
17. Hannah, R. *et al.* (2018) 'Awareness about the use, ethics and scope of dental photography among undergraduate dental students dentist behind the lens', *Journal of advanced pharmaceutical technology & research*, 11(3), p. 1012.
18. Hema Shree, K. *et al.* (2019) 'Saliva as a Diagnostic Tool in Oral Squamous Cell Carcinoma - a Systematic Review with Meta Analysis', *Pathology oncology research: POR*, 25(2), pp. 447–453.
19. Hussainy, S. N. *et al.* (2018) 'Clinical performance of resin-modified glass ionomer cement, flowable composite, and polyacid-modified resin composite in noncarious cervical lesions: One-year follow-up', *Journal of conservative dentistry: JCD*, 21(5), pp. 510–515.
20. Jackson, R. (2011) 'A pledge to hand hygiene commitment', *American Journal of Infection Control*, p. 614. doi: 10.1016/j.ajic.2010.12.007.
21. Janani, K., Palanivelu, A. and Sandhya, R. (2020) 'Diagnostic accuracy of dental pulse oximeter with customized sensor holder, thermal test and electric pulp test for the evaluation of pulp vitality: an in vivo study', *Brazilian dental science*, 23(1). doi: 10.14295/bds.2020.v23i1.1805.
22. Jeevanandan, G. and Govindaraju, L. (2018) 'Clinical comparison of Kedo-S paediatric rotary files vs manual instrumentation for root canal preparation in primary molars: a double blinded randomised clinical trial', *European archives of paediatric dentistry: official journal of the European Academy of Paediatric Dentistry*, 19(4), pp. 273–278.
23. Jenkins, K. (2011) 'Back to basics: practice guidelines for correct hand hygiene', *Journal of Renal Nursing*, pp. 226–229. doi: 10.12968/jorn.2011.3.5.226.
24. Johnson, J. *et al.* (2020) 'Computational identification of MiRNA-7110 from pulmonary arterial hypertension (PAH) ESTs: a new microRNA that links diabetes and PAH', *Hypertension research: official journal of the Japanese Society of Hypertension*, 43(4),

pp. 360–362.

25. Jose, J., Ajitha and Subbaiyan, H. (2020) ‘Different treatment modalities followed by dental practitioners for Ellis class 2 fracture – A questionnaire-based survey’, *The open dentistry journal*, 14(1), pp. 59–65.
26. Jumaa, P. A. (2005) ‘Hand hygiene: simple and complex’, *International journal of infectious diseases: IJID: official publication of the International Society for Infectious Diseases*, 9(1), pp. 3–14.
27. Kannan, A. and Venugopalan, S. (2018) ‘A systematic review on the effect of use of impregnated retraction cords on gingiva’, *Journal of advanced pharmaceutical technology & research*, 11(5), p. 2121.
28. Kumar, D. and Antony, S. D. P. (2018) ‘Calcified canal and negotiation-A review’, *Journal of advanced pharmaceutical technology & research*, 11(8), p. 3727.
29. Longtin, Y. *et al.* (2011) ‘Evaluation of hand hygiene compliance in medical educational videos’, *BMC Proceedings*. doi: 10.1186/1753-6561-5-s6-o70.
30. Mabry, T. D. (2019) *Infection Control: The Critical Need to Wash Your Dirty Hands*. Page Publishing Inc.
31. Manohar, M. P. and Sharma, S. (2018) ‘A survey of the knowledge, attitude, and awareness about the principal choice of intracanal medicaments among the general dental practitioners and nonendodontic specialists’, *Indian journal of dental research: official publication of Indian Society for Dental Research*, 29(6), pp. 716–720.
32. Marickar, R. F., Geetha, R. V. and Neelakantan, P. (2014) ‘Efficacy of Contemporary and Novel Intracanal Medicaments against *Enterococcus Faecalis*’, *Journal of Clinical Pediatric Dentistry*, pp. 47–50. doi: 10.17796/jcpd.39.1.wmw9768314h56666.
33. Mathai, E. *et al.* (2011) ‘Promoting hand hygiene in healthcare through national/subnational campaigns’, *Journal of Hospital Infection*, pp. 294–298. doi: 10.1016/j.jhin.2010.10.012.
34. Mathew, M. G. *et al.* (2020) ‘Evaluation of adhesion of *Streptococcus mutans*, plaque accumulation on zirconia and stainless steel crowns, and surrounding gingival inflammation in primary molars: Randomized controlled trial’, *Clinical oral investigations*, pp. 1–6.
35. McCalla, S., Thomas, R. and Reilly, M. (2014) ‘Hand Hygiene Compliance: “Going Back to Basics”’, *American Journal of Infection Control*, p. S134. doi: 10.1016/j.ajic.2014.03.288.
36. McGuckin, M. *et al.* (2006) ‘The effect of random voice hand hygiene messages delivered by medical, nursing, and infection control staff on hand hygiene compliance in intensive care’, *American Journal of Infection Control*, pp. 673–675. doi: 10.1016/j.ajic.2006.01.013.
37. McGuire-Wolfe, C. (2017) *Foundations of Infection Control and Prevention*. Jones & Bartlett Learning.
38. Menon, S. *et al.* (2018) ‘Selenium nanoparticles: A potent chemotherapeutic agent and an

- elucidation of its mechanism', *Colloids and surfaces. B, Biointerfaces*, 170, pp. 280–292.
39. M, M. A., Geetha, R. V. and Thangavelu, L. (2019) 'Evaluation of anti-inflammatory action of *Laurus nobilis*-an in vitro study', *International Journal of Research in Pharmaceutical Sciences*, pp. 1209–1213. doi: 10.26452/ijrps.v10i2.408.
40. &na; and &NA; (2001) 'Hand washing: First defense against infection', *Nursing*, p. 20. doi: 10.1097/00152193-200131090-00006.
41. Nandakumar, M. and Nasim, I. (2018) 'Comparative evaluation of grape seed and cranberry extracts in preventing enamel erosion: An optical emission spectrometric analysis', *Journal of conservative dentistry: JCD*, 21(5), pp. 516–520.
42. Nandhini, J. S. T., Babu, K. Y. and Mohanraj, K. G. (2018) 'Size, shape, prominence and localization of gerdy's tubercle in dry human tibial bones', *Journal of advanced pharmaceutical technology & research*, 11(8), p. 3604.
43. Paramasivam, A., Vijayashree Priyadharsini, J. and Raghunandhakumar, S. (2020) 'N6-adenosine methylation (m6A): a promising new molecular target in hypertension and cardiovascular diseases', *Hypertension research: official journal of the Japanese Society of Hypertension*, 43(2), pp. 153–154.
44. Pc, J., Marimuthu, T. and Devadoss, P. (2018) 'Prevalence and measurement of anterior loop of the mandibular canal using CBCT: A cross sectional study', *Clinical implant dentistry and related research*. Available at: <https://europepmc.org/article/med/29624863>.
45. Pratha, A. A., Ashwatha Pratha, A. and Geetha, R. V. (2017) 'Awareness on Hepatitis-B vaccination among dental students-A Questionnaire Survey', *Research Journal of Pharmacy and Technology*, p. 1360. doi: 10.5958/0974-360x.2017.00240.2.
46. Priyadharsini, J. V. *et al.* (2018a) 'An insight into the emergence of *Acinetobacter baumannii* as an oro-dental pathogen and its drug resistance gene profile – An in silico approach', *Heliyon*, p. e01051. doi: 10.1016/j.heliyon.2018.e01051.
47. Priyadharsini, J. V. *et al.* (2018b) 'In silico analysis of virulence genes in an emerging dental pathogen *A. baumannii* and related species', *Archives of Oral Biology*, pp. 93–98. doi: 10.1016/j.archoralbio.2018.07.001.
48. Pugliese, G. and Favero, M. S. (2000) 'Improved Handwashing Compliance', *Infection Control & Hospital Epidemiology*, pp. 805–805. doi: 10.1017/s0195941700044544.
49. Rahman, M. and Chattopadhyay, B. (2000) 'Handwashing: unanswered questions and compliance', *Journal of Hospital Infection*, pp. 249–250. doi: 10.1053/jhin.2000.0776.
50. Rajakeerthi and Ms, N. (2019) 'Natural Product as the Storage medium for an avulsed tooth – A Systematic Review', *Cumhuriyet Üniversitesi Diş Hekimliği Fakültesi dergisi*, 22(2), pp. 249–256.
51. Rajendran, R. *et al.* (2019) 'Comparative evaluation of remineralizing potential of a paste containing bioactive glass and a topical cream containing casein phosphopeptide-amorphous calcium phosphate: An in vitro study', *Pesquisa brasileira em*

- odontopediatria e clinica integrata*, 19(1), pp. 1–10.
52. Ramadurai, N. *et al.* (2019) ‘Effectiveness of 2% Articaine as an anesthetic agent in children: randomized controlled trial’, *Clinical oral investigations*, 23(9), pp. 3543–3550.
 53. Ramesh, A. *et al.* (2018) ‘Comparative estimation of sulfiredoxin levels between chronic periodontitis and healthy patients - A case-control study’, *Journal of periodontology*, 89(10), pp. 1241–1248.
 54. Ravinthar, K. and Jayalakshmi (2018) ‘Recent advancements in laminates and veneers in dentistry’, *Journal of advanced pharmaceutical technology & research*, 11(2), p. 785.
 55. R, H. *et al.* (2020) ‘CYP2 C9 polymorphism among patients with oral squamous cell carcinoma and its role in altering the metabolism of benzo[a]pyrene’, *Oral Surgery, Oral Medicine, Oral Pathology and Oral Radiology*, pp. 306–312. doi: 10.1016/j.oooo.2020.06.021.
 56. Samuel, S. R. (2021) ‘Can 5-year-olds sensibly self-report the impact of developmental enamel defects on their quality of life?’, *International journal of paediatric dentistry / the British Paedodontic Society [and] the International Association of Dentistry for Children*, 31(2), pp. 285–286.
 57. Savage, R. M. and Steverman, D. (2011) ‘Hand Hygiene — Before Patient Care’, *American Journal of Infection Control*, pp. E83–E84. doi: 10.1016/j.ajic.2011.04.155.
 58. Sax, H., Allegranzi, B. and Pittet, D. (2017) ‘My Five Moments for Hand Hygiene’, *Hand Hygiene*, pp. 134–143. doi: 10.1002/9781118846810.ch20.
 59. Sekar, D. *et al.* (2019) ‘Methylation-dependent circulating microRNA 510 in preeclampsia patients’, *Hypertension research: official journal of the Japanese Society of Hypertension*, 42(10), pp. 1647–1648.
 60. Seppan, P. *et al.* (2018) ‘Therapeutic potential of *Mucuna pruriens* (Linn.) on ageing induced damage in dorsal nerve of the penis and its implication on erectile function: an experimental study using albino rats’, *The aging male: the official journal of the International Society for the Study of the Aging Male*, pp. 1–14.
 61. Shahana, R. Y. and Muralidharan, N. P. (2016) ‘Efficacy of mouth rinse in maintaining oral health of patients attending orthodontic clinics’, *Research Journal of Pharmacy and Technology*, p. 1991. doi: 10.5958/0974-360x.2016.00406.6.
 62. Shahzan, M. S. *et al.* (2019) ‘A computational study targeting the mutated L321F of ERG11 gene in *C. albicans*, associated with fluconazole resistance with bioactive compounds from *Acacia nilotica*’, *Journal de Mycologie Médicale*, pp. 303–309. doi: 10.1016/j.mycmed.2019.100899.
 63. Sharma, P. *et al.* (2019) ‘Emerging trends in the novel drug delivery approaches for the treatment of lung cancer’, *Chemico-biological interactions*, 309, p. 108720.
 64. Siddique, R. *et al.* (2019) ‘Qualitative and quantitative analysis of precipitate formation following interaction of chlorhexidine with sodium hypochlorite, neem, and tulsi’, *Journal of conservative dentistry: JCD*, 22(1), pp. 40–47.
 65. Smiline, A. S. G., Vijayashree, J. P. and Paramasivam, A. (2018) ‘Molecular

- characterization of plasmid-encoded blaTEM, blaSHV and blaCTX-M among extended spectrum β -lactamases [ESBLs] producing *Acinetobacter baumannii*', *British Journal of Biomedical Science*, pp. 200–202. doi: 10.1080/09674845.2018.1492207.
66. Spinazzè, A., Cattaneo, A. and Cavallo, D. M. (2020) 'COVID-19 outbreak in Italy: protecting worker health and the response of the Italian Industrial Hygienists Association', *Annals of work exposures and health*. doi: 10.1093/annweh/wxaa044.
 67. Sridharan, G. *et al.* (2019) 'Evaluation of salivary metabolomics in oral leukoplakia and oral squamous cell carcinoma', *Journal of oral pathology & medicine: official publication of the International Association of Oral Pathologists and the American Academy of Oral Pathology*, 48(4), pp. 299–306.
 68. Teja, K. V., Ramesh, S. and Priya, V. (2018) 'Regulation of matrix metalloproteinase-3 gene expression in inflammation: A molecular study', *Journal of conservative dentistry: JCD*, 21(6), pp. 592–596.
 69. Thampi, N., Villeneuve, L. N. and Longtin, Y. (2019) 'Wash your hands, Brother John!', *BMJ*, 367, p. l6050.
 70. T, S. S., Geetha, R. V. and Thangavelu, L. (2019) 'A Survey on Awareness of Dengue Among Public', *International Journal of Research in Pharmaceutical Sciences*, pp. 1218–1221. doi: 10.26452/ijrps.v10i2.410.
 71. Vaishali, M. and Geetha, R. V. (2018) 'Antibacterial activity of Orange peel oil on *Streptococcus mutans* and *Enterococcus*-An In-vitro study', *Research Journal of Pharmacy and Technology*, p. 513. doi: 10.5958/0974-360x.2018.00094.x.
 72. Vermeil, T. *et al.* (2019) 'Hand hygiene in hospitals: anatomy of a revolution', *Journal of Hospital Infection*, pp. 383–392. doi: 10.1016/j.jhin.2018.09.003.
 73. Vijayashree Priyadharsini, J. (2019) 'In silico validation of the non-antibiotic drugs acetaminophen and ibuprofen as antibacterial agents against red complex pathogens', *Journal of periodontology*, 90(12), pp. 1441–1448.
 74. Vijayashree Priyadharsini, J., Smiline Girija, A. S. and Paramasivam, A. (2018) 'In silico analysis of virulence genes in an emerging dental pathogen *A. baumannii* and related species', *Archives of oral biology*, 94, pp. 93–98.
 75. Voss, A. and Widmer, A. F. (1997) 'No time for handwashing!? Handwashing versus alcoholic rub: can we afford 100% compliance?', *Infection control and hospital epidemiology: the official journal of the Society of Hospital Epidemiologists of America*, 18(3), pp. 205–208.
 76. Watkins, J. (2016) 'Bacterial meningitis: The importance of prevention', *British Journal of School Nursing*, pp. 11–13. doi: 10.12968/bjsn.2016.11.1.11.
 77. Wattal, C. and Khardori, N. (2013) *Hospital Infection Prevention: Principles & Practices*. Springer Science & Business Media.
 78. Wenzel, R. P. and Pfaller, M. A. (1991) 'Handwashing: efficacy versus acceptance. A brief essay', *Journal of Hospital Infection*, pp. 65–68. doi: 10.1016/0195-6701(91)90265-a.

79. Wilfinger, C. (2011) 'Innovative Initiatives to Promote Hand Hygiene', *American Journal of Infection Control*, p. E80. doi: 10.1016/j.ajic.2011.04.150.
80. World Health Organization (2009) *WHO Guidelines on Hand Hygiene in Health Care: First Global Patient Safety Challenge : Clean Care is Safer Care*. World Health Organization.