Bloodborne Pathogens: Dirty, Filthy Blood

"VICE: Tell us about yourself. Do you consume human blood?
Galatea: *I am a modern vampire. I was awakened at a very early age. It is part of who I am. It's very beautiful, very spiritual. I do consume real human blood. Oh yes, I have read all the medical hoo-ha about no human having any medical or psychological need for blood. I personally, do not care what modern medicine or the psychiatric communities have to say about it. I know what I need to be healthy. I've tested the theory over and over for in excess of 20 years. I know others like me. Frankly, the medical world can go to hell. I know what I am. I am a Vampyress. I do not prey on the innocent. I don't go ripping people's throats out. I'm quite mature with what I do. I will only drink from consenting donors.*

How did you discover you were a vampire?

My fascination with blood began as a young girl, during my first kiss. I [kissed] him really hard on the lips, and I bit him on the lip. It was my natural instinct to bite him, because for some reason, I associated that sensuality with blood. Needless to say, he never kissed me again. But I was hooked and wanted more. As time went by and meeting fellow vampire fanatics became easier, I eventually met my partner. When we made love, we consecrated our love for each other by sharing blood." [7]

It's fair to assume that at this moment you're feeling a little disturbed after reading that excerpt taken from an interview between Vice magazine and a real-life vampire (interview with a vampire…haha). In addition to being disturbed, you may also be bewildered. Or, if you're anything

like me than you're also a little queasy. In today's day and age, we aren't ignorant to the fact there are sub-genres on sub-genres of people with incredibly niche and unpopular beliefs. One of those incredibly niche and unpopular beliefs is vampirism, such as that followed by Galatea, the Vampyress in the interview. Now Galatea views blood as an almost spiritual medicine, energy source, and worships it. Albeit, she goes to an extreme (consuming it…*ick*.), she's not necessarily wrong. Blood is the water of our being; the perpetual stream that powers the anatomical formation of our souls. Everyone's blood is unique only to them, and the state of one's blood is determined by both genetics, and past choices they've made throughout their life that can affect it. Since there are very few of us who have have glistening family and medical history, and have *ALWAYS* been vigilant to maintain the pure state of their blood…it's safest for us to assume that everyone just has dirty, filthy blood.

This doesn't make us bad or cynical people. It makes us safe. Our trusty friends over at OSHA have defined blood to mean human blood, human blood components, and products made from human blood [5]. Blood borne pathogens means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV) [4].

Even healthcare facilities have a hard time preventing the spread of blood borne pathogens. In a single year, an estimated 20 million people, globally, acquire HBV infections from unsafe *MEDICAL* injections [2]. In essence, one outbreak can affect *THOUSANDS* of people; 35 outbreaks resulted in the

notification of more than 100,000 people who needed to be tested for hepatitis [2]. I don't report these facts to scare you or make you weary about going to the hospital. In fact, laterally, it's healthcare workers who are the most at risk. *MORE THAN HALF* of all nurses will experience at least one needle stick during his/her career [2]. A needle stick is exactly what it sounds like, being pricked with a needle that has already been used in patient administration or extraction. The CDC estimates that 5.6 million workers in the health care industry and related occupations (such as first response) are at risk of occupational exposure to blood borne pathogens, including human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and others [5].

Although healthcare workers are the most at risk of blood borne pathogens, employees in all industries are at risk if there is any chance of being exposed to another person's blood through even the most menial injury; such as a paper cut at the office. Our friends over at American Red Cross have broken down the steps you should take to remain safe when a coworker's blood has manifested itself in your presence:

TO PREVENT INFECTIONS [1]:

- Avoid contact with blood and other body fluids.
- Use CPR breathing barriers, such as resuscitation masks, when giving ventilations (rescue breaths).
- Wear disposable gloves whenever providing care, particularly if you may come into contact with blood or body fluids. Also wear protective coverings, such as a mask, eyewear and a gown, if blood or other body fluids can splash.
- Cover any cuts, scrapes or sores and remove jewelry, including rings, before wearing disposable gloves.
- Change gloves before providing care to a different victim.
- Remove disposable gloves without contacting the soiled

part of the gloves and dispose of them in a proper container.

- Thoroughly wash your hands and other areas immediately after providing care. Use alcohol-based hand sanitizer where hand-washing facilities are not available if your hands are not visibly soiled. When practical, wash your hands before providing care.

TO REDUCE THE RISK OF EXPOSURE AT YOUR WORKPLACE [1]:

- Use biohazard bags to dispose of contaminated materials, such as used gloves and bandages. Place all soiled clothing in marked plastic bags for disposal or cleaning. Biohazard warning labels are required on any container holding contaminated materials.
- Use sharps disposal containers to place sharps items, such as needles…(mainly for healthcare professionals).
- Clean and disinfect all equipment and work surfaces soiled by blood or body fluids. { Use a fresh disinfectant solution of approximately 1½ cups of liquid chlorine bleach to 1 gallon of water (1 part bleach per 9 parts water, or about a 10% solution) and allow it to stand for at least 10 minutes. { Scrub soiled boots, leather shoes and other leather goods, such as belts, with soap, a brush and hot water. If worn, wash and dry uniforms according to the manufacturer's instructions.

IF YOU ARE EXPOSED, TAKE THE FOLLOWING STEPS IMMEDIATELY [1]:

- Wash needle stick injuries, cuts and exposed skin thoroughly with soap and water….(mainly .

- If splashed with blood or potentially infectious material around the mouth or nose, flush the area with water.
- If splashed in or around the eyes, irrigate with clean water, saline or sterile irrigants for 20 minutes.
- Report the incident to the appropriate person identified in your employer's exposure control plan immediately. Additionally, report the incident to emergency medical services (EMS) personnel who take over care.
- Record the incident by writing down what happened. Include the date, time and circumstances of the exposure; any actions taken after the exposure; and any other information required by your employer.
- Seek immediate follow-up care as identified in your employer's exposure control plan.

As a little reminder, OSHA regulations require employers to have an exposure control plan, a written program outlining the protective measures the employer will take to eliminate or minimize employee exposure incidents. The exposure control plan guidelines should be made available to employees and should specifically explain what they need to do to prevent the spread of infectious diseases. Additionally, OSHA requires that a hepatitis B vaccination series be made available to all employees who have occupational exposure within 10 working days of initial assignment, after appropriate training has been completed. However, employees may decide not to have the vaccination. The employer must make the vaccination available if an employee later decides to accept the vaccination [1].

And let's all just hope Galatea the Vampyress has had all her vaccinations.

Need blood borne pathogen training? Check out our new safety training videos for healthcare facilities, first response, and heavy industry below:

Blood borne Pathogens in First Response

Blood borne Pathogens in Healthcare

Blood borne Pathogens in Heavy Industry

Sources:

[1] http://www.redcross.org/images/MEDIA_CustomProductCatalog/m28240107_Preventing_the_Spread_of_Bloodborne_Pathogens_Fact_and_Skill_Sheets.pdf

[2] http://blog.stericycle.com/bid/183502/14-Disturbing-Statistics-About-Bloodborne-Pathogens

[3] https://www.cdc.gov/oralhealth/infectioncontrol/faq/bloodborne_exposures.htm

[4]

https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10051#1910.1030(b)

[5] https://www.osha.gov/SLTC/bloodbornepathogens/recognition.html

[6] https://www.nlm.nih.gov/medlineplus/ency/patientinstructions/000453.htm

[7] https://www.vice.com/read/we-spoke-to-three-real-life-vampires-about-blood-lust-and-hunger-235