

The Hidden 'Infection Tax': Each Surgical Site Infection Can Consume Up to 75 Staff Hours and Displace Three Operations

Research presented at the International Nursing Research Conference 2026 highlights the burden associated with preventable surgical site infections.

VANCOUVER, CANADA, September 22, 2026 /EINPresswire.com/ -- • Research presented at the International Nursing Research Conference 2026 highlights the workforce, operating-capacity and patient-flow burden associated with preventable surgical site infections.

- A 2025 Getting It Right First Time report found significant variation in preoperative infection-prevention practices across hospitals and surgical specialities in England.

A single surgical site infection ("SSI") may consume an estimated 45 to 75 additional hours of healthcare staff time and create downstream demands equivalent to the capacity required for approximately two to three new surgical procedures, according to research presented at the International Nursing Research Conference 2026 in Glasgow, Scotland.

In addition to causing considerable distress and clinical harm to patients, SSIs place a substantial but often overlooked operational burden on healthcare systems.

The research abstract, "The Infection Tax: The Hidden Workforce and Surgical Capacity Burden of Surgical Site Infections," examines the additional nursing and multidisciplinary workload associated with SSIs. This can include extended hospital stays, follow-up appointments, readmissions and prolonged care pathways, reducing the staff time, beds and operating capacity



Online presented research at the International Nursing Research Conference 2026

available to treat other patients.

At a system level, the cumulative effect of preventable infections can contribute to longer surgical waiting lists, constrained bed availability, workforce pressures and rising healthcare costs. The findings reinforce the importance of infection prevention as both a patient-safety priority and a practical strategy for protecting hospital capacity and productivity.

The picture is complicated by the variation in the use of preoperative infection-prevention measures. A 2025 Getting It Right First Time (“GIRFT”)

report, based on a survey of 39 preoperative-assessment services in England, found significant differences in decolonisation practices between providers and surgical specialities.



Ondine Biomedical's nasal photodisinfection technology for the prevention of surgical site infections

Of the 39 services surveyed, 11 reported that they did not provide preoperative decolonisation washes to patients who had not tested positive for MRSA or MSSA, while 28 did. GIRFT also identified considerable variation in how long decolonisation treatments and washes were used before elective surgery.

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Carolyn Cross, CEO Ondine Biomedical

Separately, guidance from the National Institute for Health and Care Excellence (“NICE”) recommends that patients bathe or shower with soap either the day before or on the day of surgery. NICE also recommends considering nasal decolonisation alongside a chlorhexidine body wash before procedures in which *Staphylococcus aureus* is likely to cause a surgical site infection. The decision should take

account of the type of procedure and relevant patient risk factors.

“When a single surgical site infection absorbs tens of additional staff hours and uses capacity that could otherwise support two or three operations, the consequences extend well beyond the individual patient,” said Carolyn Cross, CEO of [Ondine Biomedical](#). “Across an already stretched health system, this infection tax compounds quickly. Preventing infections is therefore essential not only to improving patient outcomes, but also to protecting the workforce, reducing waiting lists and making better use of limited surgical capacity.”

The research was presented by Ondine Biomedical Inc. ("Ondine Biomedical" or "Ondine") (AIM: OBI), a life sciences company developing photodisinfection-based therapies for infection prevention.

One focus of SSI prevention is reducing potentially harmful pathogens carried in the nasal cavity. The nose is a major reservoir for *Staphylococcus aureus*, an important contributor to surgical site infections.

Ondine's Steriwave™ nasal photodisinfection technology is designed to rapidly reduce pathogens in the nasal cavity -a major reservoir of bugs. Administered in minutes, it is intended to complement established infection-prevention measures such as screening, decolonisation, skin preparation, antimicrobial prophylaxis and other perioperative protocols without generating resistance.

Effective and scalable infection-prevention approaches have the potential to help hospitals avoid the clinical, operational and economic consequences of SSIs while preserving staff time and supporting more timely access to surgery.

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About the research

"The Infection Tax: The Hidden Workforce and Surgical Capacity Burden of Surgical Site Infections" examines the additional workforce demands and lost surgical capacity associated with SSIs. The analysis estimates that each infection may require 45 to 75 additional hours of staff time, with downstream care demands potentially using capacity equivalent to approximately two to three new surgical procedures.

About Ondine Biomedical

Ondine Biomedical is a life sciences company developing photodisinfection-based therapies to prevent and treat infections. Its flagship product, Steriwave™ nasal photodisinfection, is designed to target a broad spectrum of pathogens in the nasal cavity, including antibiotic-resistant bacteria, without contributing to antimicrobial resistance.

Steriwave is used as part of infection-prevention protocols intended to reduce the risk of healthcare-associated infections, including surgical site infections. Ondine is committed to advancing evidence-based, non-antibiotic approaches that improve patient outcomes, support antimicrobial stewardship and reduce avoidable healthcare costs.

For more information, visit www.ondinebio.com.

U.S. Regulatory Status

Online's nasal photodisinfection technology is not approved by FDA and is not commercially available for sale in the United States. In the United States, it is limited by federal law to investigational use only.

About the International Nursing Research Conference 2026

The International Nursing Research Conference 2026 brought together nurses, researchers, educators, clinicians, healthcare leaders and policy stakeholders in Glasgow, Scotland, to share research, evidence and innovation that strengthen nursing practice and improve patient care. The conference provided a forum for discussion of contemporary healthcare challenges, including patient safety, infection prevention, workforce pressures, quality improvement and the translation of research into clinical practice.

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