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Global Hygiene Expert Pittet: Hand Hygiene Saves 5 to 8 Million Lives Each Year



Vienna/Zell am See (ots) -

"Anyone visiting somebody in a hospital must disinfect their hands," says the long-standing advisor to the World Health Organization - Pittet to visit Austria on June 26, 2025

"It takes 20 seconds – and in those seconds, you can stop the spread of death." Epidemiologist Didier Pittet speaks about hand hygiene. Hand hygiene saves 5 to 8 million lives worldwide each year, according to what he describes as "conservative estimates". Pittet teaches at the Geneva University Hospitals and regularly advises institutions such as the World Health Organization and the French Presidential Office. On June 26, 2025, the Professor of Medicine will speak at the International Hagleitner Hygiene Forum in Zell am See, Austria. The following interview is being released in advance. Pittet shares practical everyday tips on how hand hygiene works and what to consider when travelling. He also addresses global challenges: infection prevention must have lasting effects, and Pittet calls for "climate resilience" – the need of the hour, he says.

The interview

How many lives around the world does hand hygiene save every year? Do you dare to make an estimate? How many more lives could hand hygiene potentially save if it was practiced consistently in every country?

PITTET: Hand hygiene saves lives – millions, in fact. Based on WHO estimates and our work, proper hand hygiene in healthcare settings can prevent up to 50% of healthcare-associated infections (HAIs). These infections are responsible for millions of deaths annually, especially in low- and middle-income countries. Conservative global estimates suggest that 5 to 8 million lives may be saved each year through effective hand hygiene practices.

Yet the potential is far greater. If every healthcare facility worldwide implemented basic hand hygiene at the point of care – something still missing in at least half of facilities in low-income settings – millions more lives could be saved annually, particularly among mothers, newborns, and critically ill patients. As I said it several years ago: "It takes 20 seconds to clean your hands – and in those seconds, you can stop the spread of death."

What is the right way to practice hand hygiene? Are there binding standards in health service? Assuming I am visiting someone in hospital, what exactly do I need to do?

PITTET: The gold standard for hand hygiene in healthcare is alcohol-based handrub – it's fast, effective, and far superior to soap and water in killing most germs, including those responsible for deadly hospital infections. The WHO "My 5 Moments for Hand Hygiene" framework is the internationally endorsed standard used in hospitals worldwide. It defines exactly when healthcare workers – and visitors – should clean their hands to protect patients and themselves.

For visitors, it's simple but crucial: rub your hands with alcohol-based sanitizer before any contact with the patient and again when leaving the room. These two times are key to prevent carrying germs into or out of the patient's space. Soap and water are needed only if your hands are visibly dirty. By following this basic routine, the visitors become part of the safety system – and part of the solution.

Should hand hygiene also become more of a point of attention in private life – when travelling, for example? Is it enough to wash hands in private environments? Or are there also situations where disinfection is explicitly required?

PITTET: Yes, hand hygiene deserves just as much attention in private life – especially when travelling, visiting crowded places, or during outbreaks of infectious diseases. While soap and water remain the standard for routine handwashing at home (especially before eating or after using the toilet), there are many situations where alcohol-based handrub is recommended – such as when access to clean water is limited, on public transport, or in airports.

In fact, the WHO and public health experts advise carrying hand sanitizer when you are out and about. The use of alcohol-based handrub is explicitly recommended in certain contexts: before touching your face, after handling shared surfaces (like doorknobs, touchscreens, or money), and especially when caring for sick individuals at home.

In short: at home, soap and water are usually enough – but when you are on the move, alcohol-based handrub is your best line of defence.

Back to health service: what are currently the biggest challenges in infection prevention? Where can we get better? What is your plea? Is it the same for every region? Or are there differences between Central Europe and the rest of the world, for example?

PITTET: One of the most important challenges in infection prevention today is ensuring consistent implementation of basic practices, like hand hygiene, across all levels of care – from high-tech hospitals in Europe to under-resourced clinics worldwide. While the tools and evidence exist, gaps in training, staffing, infrastructure, and leadership often undermine progress. According to WHO data, nearly 1 in 2 health facilities worldwide lacks adequate hand hygiene at the point of care.

In Central Europe, the challenge is often about compliance and culture, while in lower-income settings, it is more about access and resources. My plea? Make infection prevention and control (IPC) a core institutional priority – with leadership, investment, and accountability at every level. Because every patient, everywhere, deserves safe care – and infections that can be prevented should never happen.

The climate crisis is one of the major global challenges of our time. Is it also influencing the incidence of infection? Are new risks emerging? What should we be aware of? What do we need to prepare for?

PITTET: Yes, the climate crisis is already reshaping the global landscape of infectious diseases. Rising temperatures, extreme weather, and shifting ecosystems are expanding the reach of vector-borne diseases[1] like dengue, malaria, and chikungunya into new regions – including parts of Europe. Floods and droughts also disrupt sanitation and clean water access, increasing the risk of waterborne infections, antimicrobial resistance, and outbreaks in vulnerable communities.

What should we prepare for? A world where outbreaks become more frequent, less predictable, and more difficult to control – especially in areas with weak health systems. Infection prevention must now include climate resilience: better surveillance, rapid response capacity, robust water and hygiene infrastructure, and adaptable healthcare delivery. The message is clear: fighting infections in the era of climate change means thinking beyond microbes – and preparing for the storms that carry them.

[1] Vectors include, for example, mosquitoes, ticks, and fleas — editor's note.

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Medieninhalte



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