Keeping Clinics Clean

When it comes to keeping dental waterlines clean, there are two basic strategies:

- 1. The first is to combine mechanical filtration and chemical treatment. That's a very costly and technically complicated approach. Most importantly, it doesn't actually prevent microorganisms from entering a clinic's water-delivery system.
- 2. **Seccua Ultrafiltration systems sift microorganisms** from municipal mainline water before they have a chance to contaminate your clinic's waterlines an extremely cost-effective and low-maintenance alternative.

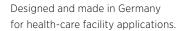




Trust Seccua to **completely remove 99.99999 % of all waterborne microorganisms** from your drinking water without having to rely on expensive, ongoing chemical treatments.



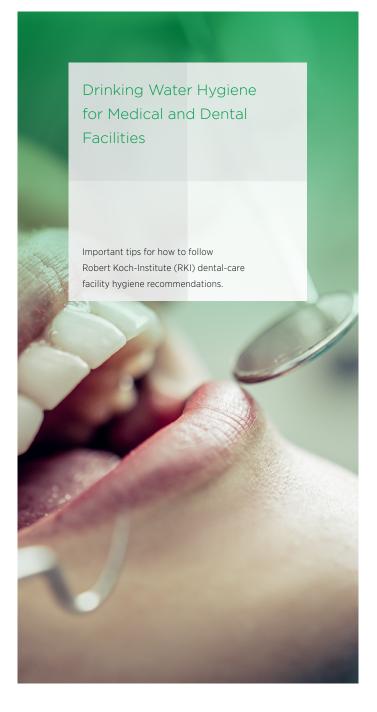
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Keep a Lid on Your Legionella and Pseudomonad CFU-l evels

The best way to ensure maximum protection for your staff, your patients, and yourself is to follow the RKI guidelines. Why is that? In most cases, threats to water hygiene come either from the clinic's own waterlines or from various dental-unit tubes.

The More Chemicals the Better?

- 1. **Medical practitioners are often under the erroneous impression that biofilm formation** in their water-delivery systems is analogous to bacteria-induced infections in their patients.
- 2. **Just kill the microorganisms** (water from a municipal mainline contains up to 200,000 cells per milliliter) with the proper antibiotic in this case chlorine and everything will be fine, right?

Big Mistake! But Why?

- 1. For starters, "germ inactivation" does not equal "waterline decontamination." That's because the majority of chemical treatments don't actually remove biofilm buildup.
- 2. **Already existing biofilm** is reinforced by the "inactive" water-borne pathogens and particles flowing through the facility's delivery system. What's more, microorganisms are able to use the "dead" biomass in order to reproduce more efficiently.

The Bottom Line If this describes your approach to "fighting" these symptoms, then there is no way to avoid the ongoing use of harsh chemicals. Even stagnant weekend water would need chemical treatment, something most systems aren't capable of in the first place.

Hygiene Comes First: RKI's Dental Facility Water-Quality Guidelines.

The German Infection Protection Act of 2000 established strict dental-health facility hygiene requirements. For dental-health facilities, clean water is an absolute must. That's why the RKI dental-setting water-quality recommendations are so important.

- 1. **Even the tiniest wound** risks becoming infected by contaminated dental water
- 2. **Contaminated water** that's been nebulized (aerosol) may be inhaled during treatment, jeopardizing patient health. People with compromised immune systems are particularly susceptible.
- 3. **Dental units** can even become contaminated through suction backflow (suck back).
- 4. **Hazardous microorganisms** commonly found in dental-unit or other dental-accessory water-delivery systems include Legionella and pseudomonads.



Enduring Prevention Solutions

The most logical way to fully protect **your entire facility's water supply is to prevent particles and microorganisms from** entering its waterlines in the first place. Avoid this problem forever by sifting at the source!

A Written Log of Infection-Control Procedures is Essential

RKI recommends annual water-quality inspections. Water-delivery systems should be tested for overall bioburden, as well as for Legionella and pseudomonads specifically. Proper written documentation provides a double-layer of protection for both licensed dentists and clinic operators against malpractice claims. On the one hand, it fulfills professional liability-insurance documentation requirements. On the other hand, operators avoid possible sanction by public-health authorities against them as individuals.

