



Philippine COVID-19 Living Clinical Practice Guidelines

Institute of Clinical Epidemiology, National Institutes of Health, UP Manila

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FOOT BATHS

RECOMMENDATION

We recommend against the use of foot baths for prevention and control of COVID-19 transmission. (*Very low quality of evidence; Strong recommendation*)

Consensus Issues

No issues were raised during the consensus panel meeting.

EVIDENCE SUMMARY

Are foot baths effective in the prevention and control of COVID-19 infections?

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Key Findings

No evidence was found evaluating the effectiveness of footbaths in preventing or controlling COVID-19 infections.

Introduction

The SARS-CoV-2 virus has been found to remain viable and infectious in aerosols for hours and on different kinds of surfaces within controlled laboratory settings [1]. Because of this finding, foot baths and other environmental strategies have been proposed to potentially mitigate the spread of the virus in households and establishments.

Footbaths involve placing a container soaked with diluted sodium hypochlorite or other acceptable disinfectant at the entrance of an establishment. Although foot baths have already been used in agricultural facilities to prevent potential spread of microorganisms that survive in the dirt for several days or weeks [2], its effectiveness for preventing or controlling COVID-19 infections remains to be determined.



Review Methods

We searched for evidence on January 25, 2021 in the following search engines and databases using free text and keywords related to “COVID-19” and “foot bath”: PubMed, Google Scholar, Cochrane CENTRAL, pre-print databases such as Chinaxiv.org, Medrxiv and biorxiv.org, trial registries of EU, Canada, IISRCTN, China, ANZ, Brazil, Germany, Japan, Korea, India, the Netherlands and Pan Africa. We also checked for recommendations and evidence summaries from the USPSTF, NICE, WHO, EU, Canadian Preventive Task Force, Australia and Covid-19 Open Living Evidence Synthesis site.

Results

We found no study that directly assessed the effectiveness of foot baths for COVID-19 prevention or control. The only study that could possibly explain the concomitant use of foot baths was the presence of SARS-CoV-2 particles found on the front of shoes of a health professional in Singapore [3]. However, the risk of transmission through this route was low since the viral particle was isolated only in that one PPE swab and was not replicated in any of the other samples taken within the facility. Furthermore, viral culture was not done to demonstrate the viability of that viral particle found on the shoe [3].

Recommendations from Other Groups

The WHO recommendation (15 May 2020) for disinfecting and cleaning environmental surfaces did not include footbaths but emphasized that floors and very low-touch surfaces should be disinfected last [4]. Direct application of properly and freshly prepared disinfectant solutions, usually sodium hypochlorite, in appropriate concentration, remains to be the ideal and more effective method. Similarly, other agencies such as the Canadian Preventive Task Force, CDC, USPSTF, and NICE did not have any recommendations on the use of footbaths.



References

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