

Title Endoquat[™] Disinfectant And Sanitizer

Agency MaHTAS, Health Technology Assessment Section, Medical Development Division, Ministry of Health Malaysia,

Level 4, Block E1, Parcel E, Presint 1, Federal Government Administrative Center, 62590 Putrajaya, Malaysia

Tel: +603 88831229, Fax: +603 88831230; htamalaysia@moh.gov.my

Reference Technology Review Report, 008/2013, online:

http://www.moh.gov.my/index.php/database stores/store view page/30/212

Aim

To assess the eficacy, safety and cost effectiveness of EndoQuatTM Disinfectant and Sanitizer to be used as surface disinfectant in the MOH hospitals and healthcare facilities

Conclusions and results

There was no retrievable published evidence on the efficacy, safety and cost effectiveness of EndoQuatTM Disinfectant and Sanitizer. Only limited unpublished low quality evidence and certification document provided by the manufacturer was available. Nevertheless, it showed that the EndoQuatTM Disinfectant and Sanitizer was effective against bacteria, fungi, spore, tubercle bacilli and virus. It also possessed tuberculocidal activity which can be classified as intermediate-level disinfectant according to the USCDC. EndoQuatTM Disinfectant and Sanitizer was also registered with the USEPA (Registration Number 1839-83), and gained recognition from DEFRA.

Recommendations

EndoQuat $^{\text{TM}}$ Disinfectant and Sanitizer can be used for disinfecting surface and non-critical items in hospitals and healthcare facility as low level disinfectant.

Methods

Literature were searched through electronic databases which included PubMed, Medline, Cochrane Database of Systematic Reviews, Cochrane Database of Controlled Trial, Health Technology Assessment, National Horizon Scanning, other websites; INAHTA, ASERNIP-S, CADTH, FDA, MHRA and general databases such as Google. Additional articles retrieved from reviewing the bibliographies of retrieved articles or contacting the authors. A critical appraisal of all relevant literature was performed using Critical Appraisal Skills Programme (CASP) checklists and the evidence graded according to the US/Canadian Preventive Services Task Force Level of Evidence (2001).

Written by

Roza S, MaHTAS, Malaysia