MICHEL MARTIN, HOST:

Here is another challenge for the new administration. It will inherit a public health system struggling to adjust to natural disasters. When Hurricane Helene blew ashore, it flooded a North Carolina plant that makes more than 60% of the nation's IV fluid bags. Hospitals are still looking at months of IV fluid shortages, and it's not clear when the plant will return to full production, so some hospitals are finding new ways to get by. Jackie Fortier, with our partner KFF Health News, tells us more about this.

JACKIE FORTIER, BYLINE: In late September, Hurricane Helene tore through the South, surprising residents like emergency room nurse Ashley Bunting.

ASHLEY BUNTING: I'm from Florida originally, and I moved up to the mountains thinking, oh, I'm never going to be impacted by a hurricane here.

FORTIER: Bunting cares for patients at Mission Hospital in Asheville, North Carolina. It's been more than a month, and the water coming out of the hospital taps still isn't safe to drink.

BUNTING: We're kind of limited to water bottles. We can't give our patients ice chips, like many of them request.

FORTIER: And the IV fluids Bunting could use instead are still in short supply. Before Hurricane Helene, one company, Baxter, produced 1.5 million IV bags at its North Carolina facility, more than half of what U.S. hospitals use. But when the factory flooded, production ground to a stop.

BUNTING: Maybe getting 60% of our IV fluids from one single source isn't the smartest long-term plan.

FORTIER: The factory has re-opened and is producing some IV bags, but the earliest they'll start to ship is late November. More than a thousand miles north in Presque Isle, Maine, Nurse Nicole Bridges is also coping with the shortage at AR Gould Hospital. She says they're transitioning patients from IV antibiotics to oral antibiotic pills sooner than they used to.

NICOLE BRIDGES: I think the workaround right now is working really well. I don't know what it's going to look like next week or next month.

FORTIER: The most fragile patients at most hospitals are still getting medications via IV, but some hospital administrators see an opportunity in the shortage. Dr. Sam Elgawly is with Inova Health in the Washington, DC, area.

SAM ELGAWLY: How often are we actually giving it more than we need to, or do we just, you know, just keep it going because a patient's in the hospital?

FORTIER: In their five hospitals, they've slashed IV fluids by about 55%. But surgical demand will soon go up. Typically, patients try to cram procedures in before the insurance cycle ends in December and deductibles reset. One way Inova is conserving IV bags is by skipping extra fluids with some medications.

ELGAWLY: You would do what's called push a medication. You don't even need a bag at all. You just give the medication without the bag. There has been increasing literature over the last 10 to 20 years that indicates maybe you don't need to use as much, and this accelerated our innovation and testing of that idea.

FORTIER: But some nurses say doing that can be more labor-intensive. Dr. Vince Green is with Pipeline Health, a small hospital system in the Los Angeles area. They are only getting half the IV bags they'd normally receive.

VINCE GREEN: Every IV fluid bag that we can get we're purchasing and we're keeping. We're trying to get our hands on everything we can.

FORTIER: Green says medical staff are encouraging patients to drink Gatorade or water instead of defaulting to IVs for hydration, and they make sure to use up the entire bag before starting another.

GREEN: If they come in with IV fluids that the paramedics have started, let's continue it. If it saves half a bag of fluids, so be it, but it adds up over time.

FORTIER: Some of these conservation measures could become permanent. First, Dr. Green would like to see data showing that patient outcomes aren't affected. For now, some of the new strategies just make sense to him.

GREEN: We don't need to have this much waste and fill up our landfills with stuff, that if we could reduce stuff, I think it'd be wise.

FORTIER: Green is still worried for the near future. They are down to a two-week supply, and respiratory virus season is just around the corner.

MARTIN: That's reporter Jackie Fortier with our partner KFF Health News.

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