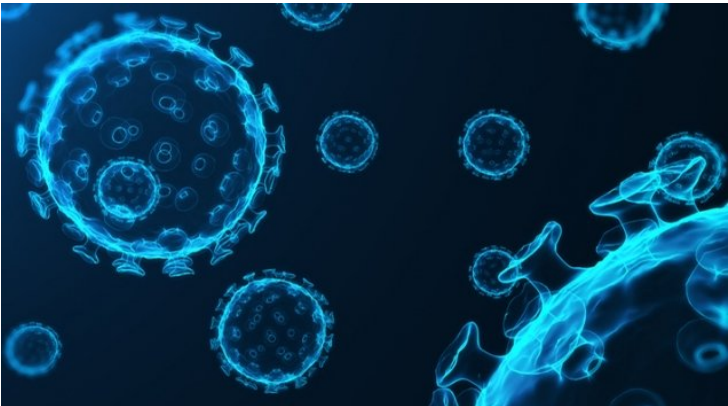


BD India addresses Hospital Acquired Infections related issues

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Dr. Victor Rosenthal, a distinguished expert on nosocomial infections, discussed the facts of health-economies in HAI prevention



With the steep rise in Hospital acquired infections (HAI) in the country, BD-India, a leading medical technology company organised 'Heal-o-nomics'. The program is conceptualized to apprehend the challenge of preventing HAIs with the aim to achieve better health outcomes at optimised cost. Sharing his expertise on the issues related to HAIs, the **President of the International Nosocomial Infection Control Consortium (INICC), Dr. Victor D. Rosenthal**, presented findings on the epidemiology and prevention of BSI, to the Hospital Infection Control Committee (HICC) of prominent health institutes in Delhi and Bangalore.

Hospital-Acquired Infections, also known as a nosocomial infection, are acquired from healthcare facilities through hospital staff, patients, contaminated equipment and linen, among other factors. According to the World Health Organisation, at any given time over 1.4 million people across the globe suffer from hospital-acquired infection (HAI). HAIs account for 2 million cases and about 80,000 deaths a year.

Dr. Victor Rosenthal, President, of the International Nosocomial Infection Control Consortium said, "Over the years, we have seen an increase in HAIs among patients. The infections are caused due to the lack of compliance with infection control guidelines, such as hand hygiene, use of outdated technology, misuse or excessive use of antibiotics and more. These infections are further leading to morbidity, mortality and increased financial burden among patients. Therefore, there is an essential need to bring down the incidence of HAIs by implementing proper guidelines and preventing the infection with bacterial resistance rather than treating it with antibiotics. Through initiatives like 'Heal-o-nomics', our aim is to educate the healthcare institutes to follow guidelines which may help in better treatment and care."

He added, "Catheter-Related Blood Stream Infections (CRBSIs) are associated with extra length of stay, morbidity, mortality, and cost. The adverse impact of CRBSIs has been observed in both, patients with central and peripheral vascular catheters. Hospitals use ten times more peripheral vascular catheters than central vascular catheters, the total number of Blood Stream Infections in patients with peripheral vascular catheters is five times more than the patients with central vascular catheters. To resolve this issue, we need to opt for improvements in behavioural change, and select the right technologies based on clinical outcomes, and cost effectiveness, rather than just their costs."

A study conducted by Dr Victor Rosenthal published in 2015 by INICC evaluated the rates of device associated infections across 40 Indian hospitals compared to several other countries. The studies were conducted on patients in intensive care units (ICUs). The findings specified that 7.92 central line-associated bloodstream infections occurred per 1,000 central line-days, 10.6 catheter-associated urinary tract infections per 1,000 urinary catheter-days and a ventilator-associated pneumonia rate of 10.4 per 1,000 mechanical ventilator-days.

Dr Navin Kumar, Consultant and Head, Clinical Microbiology and infection control, Manipal Hospitals, Delhi stated “HAIs take a considerable toll on patients and hospital resources. These infections can change a person’s disease profile from a mild health problem to a life-threatening condition. It is essential for every healthcare setting to follow correct strategies which help improve patient safety. One of the key reasons of most infections in ICU is Central-venous-catheter-Related Blood Stream Infections (CRBSIs), resulting in morbidity, extra length of stay and hospital costs. Therefore, it is essential to provide proper training to healthcare workers and abide by strict guidelines for sterilization and disinfection. We thank Dr. Rosenthal for sharing the latest findings on this subject and providing us with a perspective towards curbing this situation.”

Elaborating on the initiative, Dr. Naresh Shetty, President, MS Ramaiah Memorial Hospital, Bangalore stated, “Dialogues like ‘Heal-o-nomics’ help in countering infections and improving patient outcomes in healthcare facilities like ours. While contacting patients it is essential that healthcare workers follow proper hygiene and sanitation. Factors like unclean hands, floors and sheets along with medical instruments such as catheters, respiratory machines, and other hospital tools increase the burden of HAI. Hence, robust monitoring and surveillance are required to reduce the chances of contracting HAI for both the medical staff and the patients.”

A successful strategy for addressing HAIs is to implement strong safety standards along with a robust hygiene strategy. It is crucial that proper guidelines and newer techniques are brought into practice for better supervision and disease management.