

SNS COLLEGE OF ALLIED HEALTH SCIENCES SNS Kalvi Nagar, Coimbatore - 35 Affiliated to Dr MGR Medical University, Chennai

DEPARTMENT OF CARDIOPULMONARY PERFUSION CARE TECHNOLOGY

COURSE NAME : CLINICAL MICROBIOLOGY

TOPIC : HOSPITAL ACQUIRED INFECTIONS AND ITS PREVENTION





NOSOCOMIAL INFECTIONS

- Infections acquired in health care settings, major causes of death and increased morbidity among hospitalized patients.
- HAI's are significant burden, both for patient and public health.
- Those infections which were not present in a person at the time of admission to a hospital which develop at least 48 hours after admission, but are acquired during a stay in hospital.





- <u>Nosocomial infections</u>, also called health-care-associated or <u>hospital-acquired infections</u>, are a subset of infectious diseases acquired in a health-care facility.
- These infections can lead to serious problems like <u>sepsis</u> and even death.
- Often, <u>nosocomial infections</u> are caused by multidrug-resistant pathogens acquired via invasive procedures, excessive or improper antibiotic use, and not following infection control and prevention procedures.
- In fact, many <u>nosocomial infections</u> are preventable through guidance issued by national public health institutes such as the Centers for Disease Control and Prevention (CDC).











S PNEUMONIA



URINARY CATHETERS SURINARY TRACT INFECTIONS



CENTRAL VENOUS CATHETERS SLOODSTREAM INFECTIONS







Risk for a nosocomial infection

- Increasing age
- Greater length of hospitalization
- Excessive or improper use of broad-spectrum antibiotics
- Higher number of invasive devices and procedures (for instance: central venous catheters, urinary catheters, surgical procedures, and mechanical ventilation)
 - -<u>Diabetes</u>
 - -<u>Chronic lung disease</u>
 - –<u>Renal insufficiency</u>
 - Malnutrition





Most common type of nosocomial infection

Urinary catheters

- -A <u>urinary catheter</u> is a <u>tube</u> inserted into the <u>bladder</u> to collect urine into a closed collection system.
- -Can help patients who have difficulty controlling or emptying their bladder.
- -As patients under <u>anesthesia</u> are unable to control their bladder, urinary catheters are typically placed during surgical procedures to keep the bladder empty.







Figure 1 – Female catheter

Figure 2 - Male catheter





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Urinary tract infections

- Pathogens spread through an individual's <u>perineum</u> or a contaminated urinary catheter can lead to **<u>urinary tract infections</u>**, which are the most common <u>nosocomial infections</u>. • About 8% of UTI's are associated with the use of an indwelling bladder catheter. • Used catheters are difficult are difficult to sterilize and may be the cause of cross
- contamination/cross infection also.
- Disposable sterilized catheters should be used aseptically. lacksquare**– Symptoms** of urinary tract infections include painful urination, <u>flank pain</u>, and fever.

Bacteria responsible for UTI arise from the gut flora like *Escherichia coli* and *Klebsiella*





Surgical Site Infections

Surgical procedures

- Surgical site infections are the second most common type that can develop after surgery.
 - Length of operation, surgical technique, and operating room <u>sterility</u> are all factors that can affect the incidence of surgical site <u>nosocomial infections</u>.
- -Caused by pathogens already prevalent on the skin or by organisms shed from **members of the operating room staff**, and often involve the skin, organs, or implanted materials.
 - **Symptoms** may include skin redness, tenderness, and drainage from surgical sites.
- *Staphylococcus aureus* main pathogen responsible for this type of HAI's followed by *E.coli*, *Proteus, Enterococcus* and *S.epidermis*











Central venous catheters

- A central venous catheter (also known as a central line) is a tube placed in a large vein in the neck, arm, chest, or groin and can remain in place indefinitely.
- Ccan be used to give <u>intravenous</u> therapies such as <u>total parenteral nutrition</u> (TPN), which provides nutrients and fluids to patients.
- <u>Bloodstream infections</u> can result from pathogens that may penetrate the skin during insertion of hubs of central lines.
- This is the third most common form of <u>nosocomial infection</u> and has the highest <u>rate of</u> <u>mortality</u>.
 - Symptoms of infection may include skin redness, tenderness, and drainage at insertion sites.







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Mechanical ventilation

- -<u>Ventilator-associated pneumonia</u> is a respiratory infection caused by breathing in contaminated <u>oropharyngeal</u> flora during mechanical ventilation (machine-assisted breathing).
 - Together with central-line bloodstream infections, it is the third most common nosocomial infection.
 - Early-onset <u>nosocomial pneumonia</u> occurs within the first four days of admission and is commonly caused by <u>community-acquired</u> pathogens like *Staphylococcus aureus, <u>Streptococcus pneumoniae</u>, and <u>Haemophilus influenzae</u>.*
 - Late-onset pneumonia is frequently caused by multi-drug resistant bacteria like MRSA, S.aureus, Proteus, <u>Pseudomonas aeruginosa</u>, <u>Klebsiella</u>, and Enterobacter.







Other HAI's

- Skin and soft tissue infections Ulcers, burns, bedsores encourage bacterial colonization – lead to systemic infection
- Gastroenteritis Nosocomial infection in children \bullet
- Clostridium difficile nosocomial gastroenteritis among adults lacksquare
- Sinusitis Enteric infections
- Endometritis Infection of reproductive organs following childbirth
- Infections of eye and conjunctiva.





Symptoms

- Symptoms of HAIs will vary by type. The most common types of HAIs are:
 - Fever,
 - Increased mucus production,
 - Increased white blood cell count
 - Abnormal <u>chest X-ray</u> findings.
- Urinary tract infections (UTIs)
- Surgical site infections •
- Gastroenteritis \bullet
- Meningitis
- Pneumonia \bullet





The symptoms for these infections may include:

- discharge from a wound
- fever
- cough, shortness of breathing
- burning with urination or difficulty urinating
- headache
- nausea, vomiting, diarrhea





PREVENTION

• Implementation of infection control protocols to reduce exogenous and endogenous transmission in health-care facilities.





Exogenous transmission

- Occurs due to person-to-person interactions and through environmental crosscontamination.
 - Frequent <u>hand hygiene</u> is the most important preventative measure to limit the spread of pathogens.
 - Compliance with isolation precautions
 - Proper use of <u>personal protective equipment</u>
 - Avoidance of unnecessary use of indwelling devices, and remove them as soon as advisable.
 - Practicing proper aseptic and/or sterile techniques during insertion and maintenance of devices.
 - Routine <u>disinfection</u> of surfaces, patient equipment, and medical devices
 - Appropriate waste management







Endogenous transmission

– From excessive and improper use of broad-spectrum antibiotics.

- <u>Vancomycin</u> affects the normal balance in the patient's own endogenous <u>bacterial flora</u>, ultimately leading to an overgrowth of some bacteria
- Appropriate antimicrobial use with the correct agent, dose, and duration is needed to minimize the <u>growth</u> of antibiotic-resistant pathogens
- Transfer from one part of the <u>body</u> to the other (as with <u>urinary tract infections</u>)
- Depressed <u>immune system</u> from factors like malnourishment or chemotherapy





- Some general measures for infection control include:
- Screening the ICU to see if people with HIAs need to be isolated.
- Observing hand hygiene, which involves washing hands before and after touching people lacksquarein the hospital.
- Wearing appropriate gear, including gloves, gowns, and face protection.
- Cleaning surfaces properly, with recommended frequency.
- Making sure rooms are well ventilated.





- To reduce the risk of UTIs, your healthcare provider can:
- Follow the aseptic insertion technique to minimize infection.
- Insert catheters only when needed and remove when no longer needed.
- Change catheters or bags only when medically indicated.
- Make sure the urinary catheter is secured above the thigh and hanging below the bladder lacksquarefor unobstructed urine flow.
- Keep a closed drainage system.





TREATMENT

- Symptomatic treatment of shock, hypoventilation along with administration of broad spectrum anti-microbial therapy.
- When it is found to be bacteria Penicillin, Cephalosporins, Tetracyclines or Erythromycin should be used.
- Incase of multi-drug resistant bacteria Vancomycin and Imipenem can be used.
- For Viruses Acyclovir, Ganciclovir can be used.
- In Fungal Ketoconazole, Fluconazole, Voriconazole are used





Assessment

- 1. What are the other names of Hospital acquired infection and explain in brief?
- 2. Types of micro organisms involved in HAI and mention its names?
- 3. What are the causes and prevention of HAI?
- 4. List of Bacteria responsible for UTI, Surgical site infections and Mechanical Ventilation?
- 5. Modes of Transmission?





THANK YOU

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