



POSTER PRESENTATION

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The frequency rate of nosocomial urinary tract infections in intensive care unit patients in Shafieeh Hospital, Zanjan

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Background

Can be considered to have a nosocomial: Hospital-acquired infections encompass almost all clinically evident infections that do not originate from patient's original admitting diagnosis. Within hours after admission, a patient's flora begins to acquire characteristics of the surrounding bacterial pool. Most infections that become clinically evident after 48 hours of hospitalization are considered hospital-acquired. Infections that occur after the patient's This descriptive study was conducted to determine the incidence rate of nosocomial urinary tract infections among intensive care unit patients, and the predominant infecting organisms in Shafieeh hospital of zanjan's citydischarge from the hospital origin if the organisms were acquired during the hospital stay.

Methods

Of the 150 patients studied that were chosen base on proposed oriented sampling, 75.8% were males and 24.4% were females. Data were collected by: 1.a questionnaire and a Health Evaluation Score: Informathon for each patient was collected concerning demographics(age and sex), diagnosis, underlying diseases, nutritional status, length of stay, length of catheterization an clinical status on admisstion, failure together with an Acute Physiology And Chronic Health Evaluation(APACHEII) Score calculated from raw data collected in the first 24 hours of ICU admission. In order to determine severity of illness with APACHEII Score patients categorized to three groups: sever(n = 23), moderate(n = 11)and mild(n = 4). 2. Urine culture samples were taken every 48-72 hours until patients discharge from ICU. 3. the presence or absence of infection was

documented according to the standard definition of the CDC. Analytic of data was conducted by SPSS software.

Results

Incidence rate of NUTI[1] was 25%(n = 38). Most frequently reported microorganisms were: E. coli(50%), Staphylococcus(17.5%), Klebsiella(7.5%), Fungi isolated (5%), Entrobacter (2.5%), and the others (17.5%). Chi – square (X²) test showed significant variation in females in regard to males. Variance Analytic showed significant variation in age greater than 75 years was associated with NUTI(in regard to length of stay)(p < 0.05). Female patients with NUTI were 1.28 times the risk of the men. Patients with age greater than 75 years were 1.88 times the risk of age >45 years. The odds ratio of infection increased dramatically with increasing length of stay(p < 0.05). Patients with urinary catheter were at particular risk for urinary tract infections. Those who had urinary catheter between over 8 days were 2.08 times risk of the 1-4 days patients.

Discussion

The survey has identified and confirmed the impotence of certain risk factors (in particular length of stay and urinary catheterization) that increase the risk of developing ICU-acquired Infection(p < 0.05). the incidence rate of urinary tract infections was 25%.

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Reference

1. Nosocomial Urinary Tract Infections.

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