Hospital-acquired infections in the surgical intensive care unit

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During the hospital stay, patients are exposed to risk factors for nosocomial infections. These risks are particularly increased in patients placed in the ICU, because of their exposure to numerous invasive diagnostic and therapeutic procedures. Some of the most significant risk factors arise from invasive central venous catheters, mechanical ventilators causing pneumonias and urinary catheters causing urinary tract infections. The aim of this study is to determine the frequency of infections related to invasive therapeutic methods and to discover their most frequent causes. Data were obtained retrospectively from the Surgical Department ICU in the Clinical Hospital "Sveti Duh" from January 1, 2014 until December 31, 2016 using the electronic medical record system. Two thousand and fifty one patient were admitted. These patients were hospitalized for a total of 8,782 days, with an average stay of 3.62 days. Incidence of catheter-associated urinary tract infection was 26. The number of patients who were on mechanical ventilation was 533, while 16 of them developed VAP. The total mortality was calculated to be 7.06%. Hospital infections are good indicators of healthcare and they represent an increasing problem in modern healthcare; they prolong treatment duration and duration of hospital stay. Risk of acquiring nosocomial infections is increased by the number of therapeutic procedures and the duration of their implementation. The most common infection associated with invasive therapeutic procedures was caused by the urinary catheter and the most common isolated bacterium was Acinetobacter baumamnnii.