



Nosocomial Infections and Their Control

Ms. Kalyani Ashokrao Rawale, Ph.D. Research Scholar, Department of Nursing, Shri. Jagdishprasad Jhabarmal Tibrewala University, Jhunjhunu, Rajasthan, India.

Dr. Anupama Vinay Oka, Professor, Department of Nursing, Shri. Jagdishprasad Jhabarmal Tibrewala University, Jhunjhunu, Rajasthan, India.

Abstract

Nosocomial infections, a grave concern in healthcare, occur after a person is admitted to a hospital, soon after they are discharged, or within a month of having surgery. These infections, affecting approximately 5% to 10% of all hospitalised human patients, lead to significant increases in morbidity, mortality, and hospital costs. Common nosocomial infections include bloodstream infections, urinary tract infections, pneumonia, and surgical wound infections. The transmission of nosocomial pathogens can occur through various means, including person-to-person contact, exposure to contaminated water and food, interaction with infected individuals, contact with the skin of contaminated healthcare personnel, and shared items and surfaces. Disturbingly, many hospitals in developing countries lack an effective infection control program due to insufficient awareness of the issue, inadequate staffing, and ineffective antibiotic policies, leading to the rise of multi-drug resistant pathogens, limited funding, and unsafe practices among healthcare workers. The health budget of a country must incorporate the cost of a hospital infection control program, allocating funds for the infection control committee to handle routine control measures and manage the expenses during outbreaks. Adequate staffing and ongoing education of personnel on infection control principles, particularly emphasizing the significance of hand hygiene as the most crucial measure to minimize the risk of cross-infection, are essential.

Keywords: Nosocomial infections, Hospital-acquired infection, Infection control program, Infection control committee, and healthcare personnel.

INTRODUCTION

Nosocomial infections, also called hospital-acquired infections (HAIs), present a significant challenge within healthcare settings worldwide. Patients contract these infections while receiving medical treatment in hospitals or other healthcare facilities. Nosocomial infections encompass a diverse range of pathogens, including bacteria, viruses, fungi, and other microorganisms, and can manifest in various forms, from urinary tract infections to surgical site infections.

The prevalence of nosocomial infections is a matter of concern, with studies indicating that they contribute substantially to patient morbidity and mortality rates. Factors such as patients' compromised immune systems, invasive medical procedures, prolonged hospital stays, and the presence of antibiotic-resistant bacteria all contribute to the increased risk of these infections within healthcare environments.

Prevention and control of nosocomial infections are paramount priorities for healthcare providers and policymakers. As healthcare professionals, your role is crucial in minimising the risk of HAIs. Strategies for this include stringent adherence to infection control protocols, such as hand hygiene practices, proper sterilisation of medical equipment, and the use of personal protective equipment. Additionally, surveillance systems are employed to monitor and track the incidence of nosocomial infections, enabling early detection and intervention.

The economic burden of nosocomial infections is substantial, encompassing direct medical expenses such as prolonged hospitalisation and additional treatments, as well as indirect costs associated with decreased productivity and disability. The emergence of antibiotic-resistant bacteria strains further complicates the issue, necessitating the development of new treatment methods and antimicrobial stewardship programs to combat resistance spread. This economic perspective underscores the need for cost-effective prevention strategies to mitigate the financial impact of nosocomial infections.

NEED OF THE STUDY

Prevention of nosocomial infections is imperative due to its profound impact on patient outcomes, healthcare costs, and overall public health. The occurrence of these infections not



only compromises patient safety by extending hospital durations and increasing morbidity and mortality rates but also substantially inflates healthcare costs. Moreover, the emergence of antibiotic-resistant pathogens exacerbates the challenge, rendering traditional treatment options ineffective and underscoring the urgent need for robust prevention strategies. By implementing stringent infection control measures, promoting hand hygiene practices, optimising antimicrobial use, and enhancing environmental cleaning protocols, healthcare facilities can mitigate the risk of nosocomial infections, safeguard patient health, and promote the efficient allocation of healthcare resources.

REVIEW OF LITERATURE

Nosocomial infection globally

Raofi S. (2023) conducted a comprehensive analysis of the global prevalence of nosocomial infections (HAIs), incorporating data from 29,159,630 participants. The study revealed an overall global rate of nosocomial infections at 0.14%, with an annual increase of 0.06%. Notably, the highest rates were observed in Africa, particularly central Africa. This global perspective underscores the universal nature of the issue and the urgent need for effective infection control measures worldwide.

Nosocomial infection in India

Awandekar N. et al. (2021) investigated the rate of nosocomial infections in India, mainly focusing on intensive care units (ICUs). The study reported that the overall incidence of nosocomial infections was 4.4%, corresponding to 9.06 infections per 1,000 ICU patient days. This rate highlights significant variability across different hospitals in India, with infection rates ranging from 4.4% to as high as 83.09% in some instances.

Garcia, L., & Patel, R. (2022) stated the recent advancements in the understanding and management of nosocomial infections. Through a comprehensive analysis of current literature, the authors explore emerging trends in epidemiology, including the rise of multidrug-resistant pathogens and the impact of healthcare-associated infections on patient morbidity and mortality. They also discuss innovative approaches to infection prevention and control, such as genomic surveillance, molecular epidemiology, and the development of novel antimicrobial agents. Furthermore, the review highlights the importance of antimicrobial stewardship programs in combating the spread of antibiotic resistance within healthcare settings. The review offers valuable insights for healthcare professionals dealing with the challenges of nosocomial infections in modern healthcare. It combines clinical and research perspectives to provide comprehensive guidance in addressing these issues.

METHODOLOGY

Secondary data analysis was used in the research area.

DISCUSSION

Nosocomial infections, or hospital-acquired infections (HAIs), represent a critical challenge in healthcare settings worldwide. These infections, which patients acquire during their hospital stay, not only increase morbidity and mortality rates but also lead to extended hospital stays and elevated healthcare costs. Globally, the prevalence of HAIs is about 0.14%, with significant regional variations; for instance, central Africa reports the highest rates, whereas regions like the Americas and Western Pacific have the lowest. In India, the prevalence is notably higher, particularly in intensive care units, where rates can vary from 4.4% to as high as 83.09%, depending on the healthcare facility. Nosocomial infections, frequently encountered in healthcare settings, encompass urinary tract infections, bloodstream infections, surgical site infections, and pneumonia. These infections are often attributed to antibiotic-resistant pathogens, including methicillin-resistant *Staphylococcus aureus* (MRSA) and *Pseudomonas aeruginosa*. Contributing factors include inadequate infection control practices, overcrowded healthcare settings, and the overuse of antibiotics, which fosters the development of multi-drug-resistant organisms. Addressing these infections requires comprehensive strategies involving stringent infection control measures, improved hospital hygiene, and prudent antibiotic use.



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