# Incidence and Risk Factors of Infections due to Management of Urological Patients - Kasr Al-Ainy Hospital

Thesis Submitted By

Rehan Mohamed Saleh M.B. B.Ch, M Sc.

For Partial Fulfillment of MD Degree in Public Health

## **Supervised By**

Prof. Dr. Nafosa Ali Afifi Professor of Public Health Faculty of Medicine Cairo University

Prof. Dr. Aida Mohamed Abd El-Mohsen Professor and Head of Community Medicine Research Department National Research Centre

Prof. Dr. Enayat El-Saeed Mohamed El-Sherbiny Professor of Public Health Faculty of Medicine Cairo University Prof. Dr. Khalid Mohamed
Fawzy
Professor of Urology
Faculty of Medicine
Cairo University

Faculty of Medicine Cairo University

#### **ACKNOWLEDGMENTS**

First of all, I would like to thank "Allah" for his grace, mercy, endless gifts, and for giving me the effort to complete this work.

I would like to express my deepest gratitude to *Prof. Dr. Nafosa Ali Afifi*, Professor of Public Health, Faculty of Medicine, Cairo University, for her continuous encouragement, meticulous guidance in each step in this work, and on her endless effort in reconstruction of the study to appear in this form. No words can express what I owe her for her endless patience and support.

I am deeply indebted to *Prof. Dr. Aida Mohamed Abd El-Mohsen*, Professor of Public Health, National Research Centre, under whose supervision and guidance I had the honor and pleasure to proceed with this work. Without her help and follow up, I would not be able to complete this work.

I would like to thank *Prof. Dr. Enayat El-Saeed Mohamed El-Sherbiny*, Professor of Public Health, Faculty of Medicine, Cairo University, for giving me the idea of the study and for her supervision.

My profound thanks to *prof. Dr. Khalid Mohamed Fawzy*, Professor of Urology, Faculty of Medicine, Cairo University, for his

advice, helping me in preparing the sheet and taking the samples, and for his supervision.

I must extend my appreciation to *Prof. Dr. Nihad Ahmed Ibrahim*, Professor of Public Health, National Research Centre, for her supervision, great help, and her effort in doing the statistical analysis of the study. I was much honored to work with her.

Special thanks goes to *Prof. Dr. Hoida Ezz El Din*, Professor of Clinical Pathology, National Research Centre, for her great help in performing the laboratory investigations.

Thanks and appreciation also goes to all the *patients* and *medical care providers* who participated willingly in this study.

Finally, I wish to express my thanks to all my professors and colleagues in the National Research Centre.

#### ABSTRACT

Surgical site infections are serious problem worldwide. Urosurgery department is one of the departments with high rate of infection in the hospital. However, detailed information about the incidence and risk factors of infection in the department is deficient.

The general objective of the study is to decrease the incidence of surgical site infections among the urosurgical patients attending Kasr Al-Ainy hospital.

The study was conducted in the urosurgery department and included 125 patients. The study was divided into two parts; analytic part including the preoperative and postoperative care of patients in order to find out the incidence and risk factors of infection and descriptive part to collect data about the structure of the department and the performance of medical care providers. The opinion of the care givers about the cause of infection in the department was elicited through focus group discussion.

Results of the study showed that the incidence of postoperative urine infection amounted to 70.3 % and 34.5 % of the wounds acquired infection. Presence of chronic diseases, presence of preoperative and postoperative catheters, and the intake of chemoprophylaxis were significant risk factors for infection. Gram negative bacilli were the most common isolated pathogens from postoperative urine samples.

Recommendations were designed to prevent hospital infection. **Key words:** Incidence – Risk factors – Surgical site infections – Urology – Urine infection.

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#### LIST OF ABBREVIATIONS

**AER** Automatic endoscope reprocessing

**AMP** Antimicrobial prophylaxis

**ASA** American society of anesthesiologists

**CDC** Centres for disease control and prevention

CI Confidence interval

CO2 Carbon dioxide

**DNA** Deoxyribonucleic acid

**ECG** Electro cardiography

**EGF** Epidermal growth factor

**ELISA** Enzyme-linked immunoassay

**EPA** Environmental protection agency

**FGF** Fibroblast growth factor

**HIV-1** Human immunodeficiency virus 1

**H2O2** Hydrogen peroxide

**IGF-1** Insulin like growth factor-1

**IV** Intravenous

**JCAHO** Joint commission on accreditation of health care

organization

**Log** Logarithm

**LPLND** Laparoscopic pelvic lymph node dissection

**LRP** Laporoscopic radical prostatectomy

MRSA Mecithilin resistant staphylococcus aureus

**NNIS** National nosocomial infections surveillance

**OPA** Ortho-phthalaldehyde

**OR** Odds ratio

**OSHA** Occupational safety and health administration

**PCR** Polymerase chain reaction

**PDGF** Platelet derived growth factor

**PH** Power of hydrogen

**RNA** Ribonucleic acid

SSI Surgical site infection

**TGF-alpha** Transforming growth factor alpha

**TGF-beta** Transforming growth factor beta

**TPN** Total parentral nutrition

**USA** United States of America

**UTIs** Urinary tract infections

**UV** Ultraviolet

VISA Vancomycin intermediate staphylococcus aureus

VRE Vancomycin resistant enteroccocus

X<sup>2</sup> Chi square

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#### INTRODUCTION

Health care associated infections are a growing international problem that affects millions of people worldwide, complicate the delivery of patient care, contribute to patient death and disability, promote resistance to antibiotics, and generate additional expenditure to that already incurred by the patient's underlying disease (**Pittet and Donaldson, 2005**).

Hospital acquired infections or health care associated infections are infections that first appear two days after a patient is admitted to a hospital or other health care facility and include all clinically evident infections that do not originate from the patient's original admitting diagnosis. It is also called nosocomial infections (**Pert**, 1997).

Four types of infections account for more than 80 percent of all nosocomial infections which are urinary tract infections, postoperative wound infections (surgical site infections), blood stream infections, and pneumonia (**Pittet and Donaldson**, **2005**).

Postoperative wound and urinary tract infections in urology are major causes of illness among surgical patients and are associated with longer hospitalization and higher costs (Singhal et al, 2006).

These infections can occur after both open and endoscopic operations. In Japan, the overall incidence of postoperative wound infections after open urological operations was about 33% (**Takeyama et al, 2005**).

In a French study done to quantify the complications of transurethral resection of prostate occurring during the first three postoperative months, twenty four percent of patients experienced at least one complication and the most frequent of which was asymptomatic bacteriuria in 8.5% (Fourcade and vallancien, 2000).

In Egypt, several studies were conducted in the field of hospital acquired infections in the recent years as a trial to overview the scope of the problem and get a trial to control the infection.

A study was done in Damanhour Teaching Hospital for identification of surgical site infection rate in different surgical wards, the results showed that patients from orthopedic and plastic surgery wards were more liable to infection as the rate of infection was 66.6%, followed by patients from urology ward (50%), general surgery ward (21.5%), and zero prevalence in Ear-Nose-Throat surgery and neurosurgery wards (**Micheal, 1999**).

Advances in infection control practices occurred, yet postoperative infections remain a substantial cause of morbidity and mortality among hospitalized patients. This may be partially explained by the emergence of antimicrobial – resistant pathogens and the increased numbers of surgical patients who are elderly and/or have a wide variety of chronic, debilitating, or immunocompromising underlying diseases.

Thus, to reduce the risk of post operative wound and urinary tract infections, a realistic systematic approach must be applied with the awareness that this risk is influenced by characteristics of the patient, operation, personnel, and hospital (Mangram et al, 1999).

### **Rationale of the study:**

Urosurgery department is among the departments with high rate of infection in the hospital. There is no data about the incidence and risk factors of infection in urosurgery department - Kasr Al-Ainy hospital. Due to deficient data, we perform this study in a trial to throw a light on this problem and take a step to minimize it.

# Aim of the study