

# Study of Incidence of Nosocomial Infections Among Patients Admitted in Wards: An Institutional Based Study

E. Shivananda Murgod<sup>1</sup>, Vamshi Nandan<sup>2\*</sup>

<sup>1</sup>Assistant Professor, Department of General Medicine, Katuri Medical College and Hospital, Guntur, Andhra Pradesh, India. <sup>2\*</sup>Assistant Professor, Department of General Medicine, Dhanalakshmi Srinivasan Medical College & Hospital, Trichy, Tamil Nadu, India.

#### ABSTRACT

**Background:** Nosocomial infections can occur during healthcare delivery for other diseases as well as after patients have been discharged. They also include occupational infections among medical personnel. The present study was conducted to assess incidence of nosocomial infections among patients admitted in wards in a tertiary care hospital.

**Material & Methods:** The study was conducted among 280 patients to assess incidence of nosocomial infections among patients admitted in wards in Katuri Medical College and Hospital, Guntur, Andhra Pradesh, India. Collection of data was done from patients, analysis of infections, and their causes was carried out. Data so obtained was evaluated using SPSS-20 and was expressed as percentage and variables as required.

**Results:** In the present study total 280 patients were included out of which 172 were males and 108 were females. The percentage of subjects with nosocomial infection was 20.71%. Among these most of patients were suffering from Urinary tract infection (8.57%) followed by Pneumonia (4.64%). Nosocomial infections were present in more in males (11.42%) than in females (9.2%).

# INTRODUCTION

National Nosocomial Infections Surveillance system defines a nosocomial infection as a localized or systemic condition that results from adverse reaction to the presence of an infectious agent (s) or its toxin (s) that was not present or incubating at the time of admission to the hospital.1 These infections are opportunistic, and microorganisms of low virulence can also cause disease in hospital patients whose immune mechanisms are impaired. Hence, antimicrobial resistance increases in such cases making increase in morbidity and mortality. Nosocomial infections are typically exogenous, the source being any part of the hospital ecosystem, including people, objects, food, water, and air in the hospital.<sup>2</sup> A prevalence survey conducted under the auspices of World Health Organisation (WHO) in 55 hospitals of 14 countries representing 4 WHO Regions (Europe, Eastern Mediterranean, South-East Asia and Western Pacific) showed an average of 8.7% of hospital patients had nosocomial infections.<sup>3</sup> The most common **Conclusion:** The present study concluded that incidence of nosocomial infection was 20.71% among patients admitted in wards in a tertiary care hospital. Urinary tract infection was the most common infection. Nosocomial infections were prevalent in males than in females.

**Keywords:** Nosocomial Infections, Hospital Acquired Infections, Urinary Tract Infection.

\*Correspondence to: Dr. Vamshi Nandan, Assistant Professor, Department of General Medicine, Dhanalakshmi Srinivasan Medical College & Hospital, Trichy, Tamil Nadu, India. Article History: Received: 04-10-2016, Revised: 25-10-2016, Accepted: 19-11-2016 Access this article online

Website: www.ijmrp.com	Quick Response code
DOI: 10.21276/ijmrp.2016.2.6.076	

pathogens are staphylococci, pseudomonas, E-coli, Klebsiella, mycobacterium tuberculi, candida, aspergillus, fusarium trichosporon and malassezia all of these pathogens leads to increased risk of morbidity and mortality.<sup>4</sup> In the 21st century, nosocomial infections are more alarming due to the reasons of; hospitals serving a large number of people who are sick and have lower immunity, invasive medical procedures, poor hygiene practice, and routine use of antimicrobial agents.<sup>5</sup> Nosocomial infections are still a major public health problem, because of antimicrobial resistance to pathogens.<sup>6</sup> The present study was conducted to assess incidence of nosocomial infections among patients admitted in wards in a tertiary care hospital.

# **MATERIALS & METHODS**

The study was conducted among 280 patients to assess incidence of nosocomial infections among patients admitted in wards in Katuri Medical College and Hospital, Guntur, Andhra Pradesh, India. Before the commencement of the study ethical clearance was taken from the Ethical Committee of the institute and informed consent was taken from the participants after explaining them the study.

Collection of data was done from patients, analysis of infections, and their causes was carried out. Detailed history and physical examination were carried out. Blood and urine specimen among study patients was taken after 48 hours of admission who developed fever after 48hours of admission and followed till discharge from the hospital. Bacterial strains were identified with the help of gram staining and biochemical tests. All these study subjects were examined daily to assess the treatment and to detect the confirmation of any new infection. Patient's body temperature was also monitored regularly. The relevant investigations were performed according to the clinical presentation of patients and also after taking opinion from consultants of relevant departments. Data so obtained was evaluated using SPSS-20 and was expressed as percentage and variables as required.

Table 1: Distribution of nosocomial infection am	Table 1: Distribution of nosocomial infection among nosocomial positive patients.	
Nosocomial infection	N(%)	
Urinary tract infection	24(8.57%)	
Pneumonia	13(4.64%)	
Soft tissue infections	8(2.85%)	
Gastroenteritis	5(1.78%)	
Blood stream infections	5(1.78%)	
Meningitis	3(1.07%)	
Total	58(20.71%)	

Table 2: Incidence of Nosocomial infections according to gender		
Gender	Nosocomial infections Present (%)	Nosocomial infections Absent (%)
Male(172)	32(11.42%)	140(50%)
Female(108)	26(9.2%)	82(29.28%)
Total (280)	58(20.71%)	222(79.28%)

#### RESULTS

In the present study total 280 patients were included out of which 172 were males and 108 were females. The percentage of subjects with nosocomial infection was 20.71%. Among these most of patients were suffering from Urinary tract infection (8.57%) followed by Pneumonia (4.64%). Nosocomial infections were present in more in males (11.42%) than in females (9.2%).

#### DISCUSSION

Hospital-acquired infections (HAIs), also known as healthcareassociated infections (HCAI), are infections occurring in a patient in a hospital or other healthcare facility in whom the infection was not present or incubating at the time of admission.<sup>7</sup> HAI is a major problem for patient safety and has a high impact in terms of morbidity and mortality.<sup>8.9</sup>

In the present study total 280 patients were included out of which 172 were males and 108 were females. The percentage of subjects with nosocomial infection was 20.71%. Among these most of patients were suffering from Urinary tract infection (8.57%) followed by Pneumonia (4.64%). Nosocomial infections were present in more in males (11.42%) than in females (9.2%).

A large cohort multicentric international study has reported at least one ICU acquired infection in 18.9% of patients, with an incidence ranging from 2.3% to 49.2% across the centers.<sup>10</sup>

Mythri H et al, 2014 did a study to find the current status of nosocomial infection, rate of infection and distribution of infection among patients admitted in Medical Intensive Care Unit (MICU) of a District Hospital. Incidence of nosocomial infections in MICU patients was 17.7% (23/130). Of which 34.8% (8/130) was urinary tract infection (UTI) being the most frequent; followed by

pneumonia 21.7% (5/130), 17.4% (4/130) surgical site infection, 13.0% (3/130) gastroenteritis, 13.0% (3/130) blood stream infection and meningitis. The nosocomial infection was seen more in the 40-60 year of age. The male was more prone to nosocomial infections than the female.<sup>11</sup>

Urinary tract infection (UTI) is the most common and frequent nosocomial infection seen in critically ill patients.<sup>12,13</sup> Nosocomial pneumonia is the second most frequent nosocomial infection in critically ill patients and represents the leading cause of death from infection acquired in hospital.<sup>14</sup>

A study carried out by Koch et al in Norway reported that men present higher overall HAI prevalence than women.<sup>15</sup>

The most common reported nosocomial infection in ICUs is urinary tract infection, followed by pneumonia and primary blood stream infection.<sup>16</sup> Infection control strategies such as hand hygiene and wearing gloves; paying attention to well established processes for decontamination and cleaning of soiled instruments and other items, followed by either sterilization or high-level disinfection; and improving safety in operating rooms and other high-risk areas where the most serious and frequent injuries and exposures to infectious agents can resolve the problem to a major extent.<sup>17</sup>

## CONCLUSION

The present study concluded that incidence of nosocomial infection was 20.71% among patients admitted in wards in a tertiary care hospital. Urinary tract infection was the most common infection. Nosocomial infections were prevalent in males than in females.

E. Shivananda Murgod & Vamshi Nandan. Incidence of Nosocomial Infections Among Patients Admitted in Wards

## REFERENCES

1. Garner JS, Jarvis WR, Emori TG, Horan TC, Hughes JM. CDC definitions for nosocomial infections, 1988. Am J Infect Control. 1988;16:128–40.

2. Patwardhan RB, Dhakephalkar PK, Niphadkar KB, Chopade BA. A study on nosocomial pathogens in ICU with special reference to multiresistant Acinetobacter baumannii harbouring multiple plasmids. Indian J Med Res. 2008;128:178–87.

3. Tikhomirov E. WHO Programme for the Control of Hospital Infections. Chemiotherapia 1987; 3:148-51.

4. Corona A, Raimondi F. Prevention of nosocomial infection in the ICU setting. Minerva Anestesiologica, 01 May 2004, 70(5):329-337.

5. Revelas A. Healthcare–associated infections: a public health problem. Nigerian Med J. (2012) 53:59. 10.4103/0300-1652.103543

6. Sah M, Mishra S, Ohora H, Kirikae T, Sherchan J, Rijal B, et al. Nosocomial Bacterial Infection and Antimicrobial Resistant Pattern in a Tertiary Care Hospital in Nepal. J Institute Med. (2014) 36.

7. Benenson AS. Control of communicable diseases manual, 16th ed. Washington: American Public Health Association; 1995.

8. Burke JP. Infection control – A problem for patient safety. N Engl J Med 2003; 348: 651-6.

9. Allegranzi B, Bagheri Nejad S, Combescure C, Graafmans W, Attar H, Donaldson L, et al. Burden of endemic health-careassociated infection in developing countries: Systematic review and meta-analysis. Lancet 2011; 377: 228-41.

10. Alberti C, Brun-Buisson C, Burchardi H, Martin C, Goodman S, Artigas A, et al. Epidemiology of sepsis and infection in ICU patients from an international multicentre cohort study. Intensive Care Med 2002;28:108-21.

11. Mythri H, Kashinath K. Nosocomial infections in patients admitted in intensive care unit of a tertiary health center, India. Ann Med Health Sci Res. 2014 Sep;4(5):738-41. doi: 10.4103/2141-9248.141540. PMID: 25328785; PMCID: PMC4199166.

 Laupland KB, Zygun DA, Davies HD, Church DL, Louie TJ, Doig CJ. Incidence and risk factors for acquiring nosocomial urinary tract infection in the critically ill. J Crit Care 2002; 17:50–7.
Erbay H, Yalcin AN, Serin S, Turgut H, Tomatir E, Cetin B. Nosocomial infections in intensive care unit in a Turkish university hospital: a 2-year survey. Intensive Care Med 2003; 29: 1482–8.

14. Jean YF, Jean C. Nosocomial Pneumonia. In Mitchell PF, Edward A, Vincent JL, Patrick MK, (eds.) Text Book of Critical Care. 5th Ed. Elsevier 2005; p.663–77.

15. World Health organization (WHO). Infection prevention and control in health care: time for collaborative action regional Committee for the eastern Mediterranean. EM/RC57/6. Geneva: WHO, 2010.

16. Richards MJ, Edwards JR, Culver DH, Gaynes RP. Nosocomial infections in medical intensive care units in the United States. National Nosocomial Infections Surveillance System. Crit Care Med. 1999;27:887e892

17. Agarwal R, Gupta D, Ray P, Aggarwal AN, Jindal SK. Epidemiology, risk factors and outcome of nosocomial infections in a Respiratory intensive Care Unit in North India. J Infect 2006; 53:98-105.

Source of Support: Nil. Conflict of Interest: None Declared.

**Copyright:** © the author(s) and publisher. IJMRP is an official publication of Ibn Sina Academy of Medieval Medicine & Sciences, registered in 2001 under Indian Trusts Act, 1882.

This is an open access article distributed under the terms of the Creative Commons Attribution Non-commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

**Cite this article as:** E. Shivananda Murgod, Vamshi Nandan. Study of Incidence of Nosocomial Infections Among Patients Admitted in Wards: An Institutional Based Study. Int J Med Res Prof. 2016; 2(6):346-48. DOI: 10.21276/ijmrp.2016.2.6.076