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DEVICE ASSOCIATED INFECTION RATE AND BACTERIAL RESISTANCE IN AN EGYPTIAN UNIVERSITY HOSPITAL

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This study aimed to determine device associated infection (DAI) rates and the microbiological and antibiotic resistance profiles of infecting pathogens in ICUs of Beni-Suef University Hospital. It is prospective surveillance of healthcare-associated infections performed to adult and newborn patients admitted to ICUs during June 2012 to May 2013. Three hundred and three patients were followed in ICUs for a total of 2,636 patient days. The total number of DAIs was 78, for an overall rate of 88.5/1000 device days. Ventilator associated pneumonia posed the greatest risk (68.7 per 1,000 ventilator days in the adult ICU, and 77.7 per 1,000 ventilator days in the neonatal ICU), catheter associated urinary tract infections (CAUTI) (24.4 per 1,000 catheter days in the adult ICU), lastly, central line-associated bloodstream infections (CLABSI) (13.84 per 1,000 catheter days in the adult ICU, 28.3 per 1,000 catheter days in the neonatal ICU). The most frequently isolated pathogens in VAP were Acinitobacter Spp. (75%) in adult ICU and *Klebsiella Spp*. (55%) in neonatal ICU. Candida Spp. was the leading pathogens in patients with CAUTI. In CLABSI, Enterococcus Spp. was the most frequently isolated pathogens (33%) in adult ICU and *Klebsiella Spp*. (45%) in neonatal ICU. Overall of Staphylococcus aureus infections were caused by methicillin-resistant strains, and 45.6% of *Pseudomonas aeruginosa* isolates were resistant to fluoroquinolones and Tienam, 88.9% were resistant to piperacillin-tazobactam. The establishments of active infection control programs that involve infection surveillance have become a priority.

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