

Nosocomial Infection Prevention in Cusco, Peru

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Purpose

To decrease the incidence of nosocomial infections in the burn unit of the Hospital Regional In Cusco, Peru through education and resource acquisition.



Background

Hospitals without adequate resources for appropriate identification, containment and treatment of nosocomial infections are more likely to acquire them. For impoverished patients requiring prohibitively expensive antibiotics and treatments and already overworked staff, these infections constitute a significant source of morbidity and mortality. Lack of education, substandard infrastructure and the doctor/nurse hierarchy are major barriers in the prevention of intra-hospital infections. While ideal infection control practices require substantial and continuous financial investment, studies have shown that small educational interventions are successful in decreasing nosocomial infection rates.

In the burn unit at the Hospital Regional of Cusco, Peru most patients are under the age of five. Due to their long hospital stays and weakened defenses, these patients are at increased risk of developing infections. Parents are responsible for the purchase of bandages, medication, clothing, toiletries and basic hygienic supplies. However, lack of consistent availability, family inability to pay for these supplies, and inadequate knowledge on disease transmission remain major obstacles.

Methods

A hospital administrator asked parents, patients and staff to attend an information session on disease prevention. Attendees received Spanish language handouts with illustrations on appropriate hand washing techniques and bars of hand soap. The ten minute presentation covered germ theory, basic hygiene and advanced hand washing techniques. After the presentation adjourned, attendees relocated to their rooms. In these small groups the facilitator reviewed the presentation and observed the practice of new hand washing techniques.

The facilitator laminated copies of instruction sheets and placed them above every sink in the ward. The unit psychologist was responsible for continuing education and supply distribution due to her close contact with patients and families. To prevent unintended use of hand soap, laundry detergent was purchased and donated to the ward.

Donated funds from the author's friends and family allowed the purchase of medical supplies and a video camera. The camera will allow Capacitaciones to make educational videos on health education and promotion for regional community health centers and to document ward conditions for the purpose of procuring supplies.

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Conclusions or Discussion

Morbidity, mortality and medical expenses could decrease with increased education, hand-washing compliance and adequate supplies. Encouraging hand washing is a critical part of preventing nosocomial infections and is also proven effective in decreasing diarrheal disease at home. Participation of patients and parents was over 90%, but only one staff member was in attendance. Since staff members constitute an important disease vector, their lack of attendance was a detriment to the effectiveness of the intervention.



References

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