



The main study aim was to track infections, evaluate performance, and identify opportunities for improved practice since infections, especially those associated with multidrug-resistant organisms, are the second most common cause of death among end-stage renal disease patients” Abdelfattah et al (2019).

Abstract:

Background: The main study aim was to track infections, evaluate performance, and identify opportunities for improved practice since infections, especially those associated with multidrug-resistant organisms, are the second most common cause of death among end-stage renal disease patients.

Methods: This study describes the establishment of baseline dialysis event surveillance at a large dialysis center. Every month, the dialysis center staff reported the total number of maintenance hemodialysis patients to the department of infection control and hospital epidemiology. The surveillance system for dialysis events included monthly monitoring of hemodialysis patients in outpatient settings for positive blood cultures, intravenous antimicrobial initiation, and local vascular access infections.

Results: We calculated the pooled mean rates of positive blood cultures, intravenous antimicrobial initiation, and local vascular access infections during the period from June 1,

2014 to September 30, 2017. Results indicated more dialysis events were attributed to the CVC than any other dialysis vascular access. Regardless of vascular access type, intravenous antimicrobial initiation was the most commonly reported dialysis-associated event.

Conclusions: Dialysis events surveillance can be used to produce a decrease in both morbidity and mortality rates in hemodialysis patients.

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Reference:

Abdelfattah, R.R., Al-Jumaah, S., Al-Korbi, L. and Al-Qahtani, T. (2019) Three years' experience of dialysis event surveillance. American Journal of Infection Control. February 6th.

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