



“A multifaceted infection control program is effective in reducing the CLABSI rate among neonates. Such interventions could be extended to other resource-limited countries” Zhou et al (2015).

Reference:

Zhou, Q., Lee, S.K., Hu, X-j., Jiang, S-y., Chen, C., Wang, C-q. and Cao, Y. (2015) Successful reduction in central line-associated bloodstream infections in a Chinese neonatal intensive care unit. American Journal of Infection Control. 43(3), p.275-279.

Multifaceted infection control program is effective in reducing CLABSI [@ivteam #ivteam](http://ctt.ec/cX1J2+)

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Abstract:

Background: Few data are available on central-line associated bloodstream infections (CLABSIs) in Chinese neonatal intensive care units (NICUs). The aims of this study were to characterize CLABSIs among neonates in a Chinese NICU and evaluate the impact of a multifaceted evidence-based practice for improving quality program to decrease CLABSI.

Methods: We conducted a prospective before-after intervention study with a 1-year follow-up among patients with central lines at the NICU of the Children’s Hospital of Fudan University

between January 2008 and December 2010. The study was conducted in 3 phases: before, during, and after the intervention. A multifaceted infection control program was introduced in phase 2 with successive surveillance. CLABSIs were prospectively monitored and compared.

Results: A total of 171 patients with central lines (CLs) were observed; 29 of them developed CLABSI corresponding to 7.35 per 1,000 catheter days, with a CL utilization ratio of 37.9%. Overall CLABSI rate decreased gradually from 16.7 per 1,000 CL days in phase 1 to 7.6 per 1,000 CL days in phase 2 ($P = .08$) to 5.2 per 1,000 CL days in phase 3 ($P < .01$). Gram-negative bacterium (54.5%) was the predominant pathogen in CLABSIs.

Conclusion: A multifaceted infection control program is effective in reducing the CLABSI rate among neonates. Such interventions could be extended to other resource-limited countries.

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