

The risk of occupational transmission of bloodborne pathogens to health care workers is primarily associated with needlestick and sharps injuries (NSIs). However, most NSIs are not reported, and most health care workers are not aware of postexposure procedures” Çiçek-Şentürk et al (2018).

Abstract:

Background: The risk of occupational transmission of bloodborne pathogens to health care workers is primarily associated with needlestick and sharps injuries (NSIs). However, most NSIs are not reported, and most health care workers are not aware of postexposure procedures.

Methods: Data for NSIs reported in our hospital between 2008 and 2016 were reviewed retrospectively.

Results: A total of 546 staff members reported NSIs. Of these, 376 (68.9%) were women. NSIs were more commonly reported by trainee nurses (243 [44.5%]), followed by nurses (121 [22.2%]), cleaning staff (108 [19.8%]), and doctors (49 [9%]). The rate of postexposure interventions was 13% in 2008 and 92.6% in 2016 ($P < .0001$; $\chi^2 = 82.866$). NSI rates also show that the number of applications with NSIs increased over the years. When occupational blood exposure was examined, the number of bloodborne pathogens was 50 (9.3%) cases of hepatitis B virus, 30 (5.6%) cases of hepatitis C virus, 3 cases of Crimean-Congo hemorrhagic fever, 1 case of HIV, and 2 cases of hepatitis B virus and hepatitis C virus coinfection.

Discussion: Over the years, the increase in both the appropriate intervention rate and the number of reports to the hospital infection control committee after NSIs shows that regular training regarding NSIs is effective. **Conclusions** Hospital infection control committees may play a more active role in raising awareness in this regard and thus reducing the rate of unreported NSIs.

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Reference:

Çiçek-Şentürk, G., Tekin, A., Gürbüz, Y., Tütüncü, E., Sevinç, G., Kuzi, S., Altay, A., Altın, N. and Şencan, I. (2018) Retrospective investigation of 9 years of data on needlestick and sharps injuries: Effect of a hospital infection control committee. *American Journal of Infection Control*. September 14th. .

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