

The aim was to establish the pooled prevalence of needlestick injuries among healthcare workers in Ethiopia” Yazie et al (2019).

Abstract:

BACKGROUND: Health facilities can provide diagnostic, curative, and prognostic services for the community. While providing services, healthcare workers can be exposed to needlestick injuries that can transmit pathogenic organisms through body fluids.

OBJECTIVE: The aim was to establish the pooled prevalence of needlestick injuries among healthcare workers in Ethiopia.

METHODS: This systematic review and meta-analysis was conducted according to PRISMA guidelines. Articles were searched from Google Scholar, PubMed, Science Direct, and Scopus databases using a combination of keywords and Boolean functions. All the searched articles were imported into the EndNote X9 software, and then, duplicate data files were removed. Article screening and data extraction were done independently by two authors. Data manipulation and analyses were done using STATA version 15.1 software.

RESULTS: The analysis of 23 full-text articles showed that the prevalence of the 12-month and lifetime needlestick injuries among the primary studies ranged from 13.2 to 55.1% and 18.6 to 63.6%, respectively. The pooled prevalence of needlestick injuries among the Ethiopian healthcare workers was 28.8% (95% CI 23.0-34.5) and 43.6% (95% CI 35.3-52.0) for the 12 months and lifetime, respectively.

CONCLUSIONS: The pooled prevalence of needlestick injuries among Ethiopian healthcare workers was high. Therefore, efforts should be implemented to reduce the occurrence of injuries. Adequate protective equipment and safety-engineered devices should be supplied for the healthcare workers. It could be more effective to reduce the factors contributing to increased exposures through the allocation of adequate numbers of the healthcare workforce and implementing in-service training.

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Reference:

Yazie, T.D., Chufa, K.A. and Tebeje, M.G. (2019) Prevalence of needlestick injury among healthcare workers in Ethiopia: a systematic review and meta-analysis. *Environmental Health and Preventive Medicine*. 24(1), p.52. doi: 10.1186/s12199-019-0807-7.