



Needlestick injuries (NSIs) among healthcare workers (HCWs) pose an important health challenge and several pieces of evidence show that in many cases HCWs do not report the injury” Joukar et al (2018).

Abstract:

BACKGROUND: Needlestick injuries (NSIs) among healthcare workers (HCWs) pose an important health challenge and several pieces of evidence show that in many cases HCWs do not report the injury.

MATERIALS AND METHODS: This multicenter descriptive cross-sectional study was performed in eight teaching hospitals of Rasht, Iran. Using consecutive sampling methods, 1010 nurses were enrolled from October 2014 to January 2015. A three-part self-administered questionnaire was used. It included questions on demographic features, NSI-related questions, and questions on the knowledge of hepatitis B and C viruses (HCV, HBV).

RESULTS: Among the 1010 participants, 580 (57.42%) showed a positive history of NSI; the total number of occurrences of NSI was 914. The major item causing NSI was the syringe with needle (315; 34.47%). In this way, NSIs occurred most frequently during recapping and injection [339 (37.10%) and 147 (16.10%), respectively]. Only 92 (10.07%) of all NSI positive participations had referred to the infection control units of their hospitals. The others mostly answered the question of “Why did you not report the incident?” with being too busy at work

at the time of injury (140; 27.58%). The results showed that among participants with <5 years elapsed since their vaccination, the risk of NSI reduced to 60% [$p < 0.02$, odds ratio (OR) = 0.40, 95% confidence interval (CI) = 0.20-0.80]. CONCLUSIONS: It seems that NSI is still a major problem among nurses. Correspondingly, HCWs do not take the reporting system seriously and training them requires an ongoing activity in all hospitals.

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Reference:

Joukar, F., Mansour-Ghanaei, F., Naghipour, M. and Asgharnezhad, M. (2018) Needlestick Injuries among Healthcare Workers: Why They Do Not Report their Incidence? Iranian Journal of Nursing and Midwifery Research. 23(5), p.382-387.

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