



Health care without avoidable infections

The critical role of
infection prevention
and control



World Health
Organization



No one should get sick seeking care. Yet globally, hundreds of millions of people are affected every year by health care-associated infections (HAIs), **many of which are completely avoidable**. No country or health system, even the most developed or sophisticated, can claim to be free of HAIs.

Preventing HAIs has never been more important. HAIs significantly impact the ability of health systems to adapt, respond and manage infection risk alongside the ongoing clinical care of patients.

Infection prevention and control (IPC) is a **practical, evidence-based approach** preventing patients and health workers from being harmed by avoidable infections. Effective IPC requires constant action at all levels of the health system, from policy-makers to facility managers, health workers and those who access health services.

What are HAIs?

An HAI is an infection that is acquired by a patient during care delivery in a hospital or other health care facility that was not present or incubating on admission. Visitors, family members and health workers can also be affected by HAIs.

HAIs are mostly caused by microorganisms resistant to one or more commonly-used antibiotics. Common HAIs include urine, chest, blood and wound infections.

Common HAI determinants

In all settings

- Inappropriate use of invasive devices and antibiotics
- High-risk diagnostic or therapeutic procedures
- Immuno-suppression, other severe underlying illnesses and conditions affecting newborns and older people
- Sub-standard application of IPC precautions

In settings with limited resources

- Poor water, sanitation, waste management and environmental cleaning
- Insufficient equipment
- Understaffing, as well as overcrowding
- Poor knowledge of all IPC measures including injection and blood transfusion safety
- Absence of local/national IPC guidelines, policies and programmes

Why preventing HAIs is important

While each year hundreds of millions of patients are affected by HAIs, this problem usually receives public attention only when there is an outbreak or epidemic, as with the recent Ebola virus disease outbreak in West Africa. Although often hidden from public attention, the endemic, ongoing problem is very real and no institution or country can afford to ignore it.



- HAIs cause **unnecessary death**
- HAIs result in a **human and economic burden**
- HAIs **prolong hospital stays**, create **long-term disability** and **increase the burden of antimicrobial resistance (AMR)**
- Without regular HAI surveillance, as part of an IPC programme, recognizing the burden locally and nationally in order to prioritize action is impossible

HAI burden – key facts



HAI frequency

On average, **1 in every 10 patients is affected by HAIs worldwide**. In acute care hospitals, out of every 100 patients, 7 in developed and 15 in developing countries will acquire at least one HAI



Intensive care

In high-income countries, **up to 30% of patients are affected** by at least one HAI in intensive care units; in developing countries the frequency is at least 2–3 times higher



Injection safety

16 billion injections are administered every year worldwide, up to 70% of which are given **with reused syringes and needles** in some developing countries



Hand hygiene

On average, **61% of health workers** do not adhere to recommended hand hygiene practices



Neonatal care

Among hospital-born babies, infections are responsible for **4%–56% of all causes of death** in the neonatal period



Maternal care

In Africa, up to **20% of women** get a wound infection after a caesarean section, affecting their health and ability to care for their baby



AMR

Patients infected with methicillin-resistant *Staphylococcus aureus* (MRSA) are about **50% more likely to die** than those infected with non-resistant strains

Why IPC is so important

IPC is unique in the field of patient safety and quality of care, as it is **universally relevant to every health worker and patient**, at every health care interaction.

IPC contributes to achieving the following global health priorities:

- I. Sustainable development goals (SDGs) 3.1-3, 3.8, 3.d and 6



- II. AMR global and national action plans
- III. Preparedness and response to outbreaks
- IV. International health regulations
- V. Post-ebola recovery plans
- VI. Quality universal health coverage
- VII. Patient and health worker safety
- VIII. WHO framework on integrated people centred services

Defective IPC causes harm and can kill. **Without effective IPC it is impossible to achieve quality health care delivery.** At a time of threat from AMR and when most countries are working to ensure access to integrated, people centred health services for all, IPC has a tremendous contribution to make.



If we are to achieve strong health systems we must work together to integrate infection prevention and control at every level of the system. This is an important public health issue.

Dr Marie-Paule Kieny, Assistant Director-General,
Health Systems and Innovation, WHO

How does IPC lead to health care without avoidable infections?

There is overwhelming evidence that the implementation of IPC best practices leads to significant reductions in HAIs and patient harm. Best results are achieved when IPC is supported by political and management support, integrated within clinical services and a patient safety culture.

Evidence of IPC effectiveness

>30%
Reduction

Effective IPC programmes lead to more than a 30% reduction in HAI rates

25-57%
Reduction

Surveillance contributes to a 25-57% reduction in HAIs

50%
Reduction

Improving hand hygiene practices may reduce pathogen transmission in health care by 50%

56%
Reduction

MRSA declined by 56% over a four-year period in England in line with a national target

44%
Reduction

A safety culture and prevention programme reduced SSI risk in African hospitals by 44%

80%
Compliance

Between 2010 and 2015 Australia achieved and sustained 80%

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_25103

