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Project Title:

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Executing Institute: National Taiwan University Hospital

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P.I. Position Title: National Taiwan University Hospital

P.I. Institute: MD, PhD

Abstract:

Healthcare associated infection is the most common type of adverse events for hospitalized patients and infection control become an important issue regarding patient safety. This study analyzed hospital-wide nosocomial infection surveillance data collected from 12 hospitals located in different part of Taiwan. The secular trends of nosocomial infection by hospital, type of hospital, type of services, focus of infection, and epidemiologically important microorganisms such as methicillin-resistant *Staphylococcus aureus*, vancomycin-resistant enterococci, multidrug-resistant *Acinetobacter baumannii*, and fungi, were described. The reasons of the change of infection rate included the adequacy of man power, occurrence of adverse events such as outbreaks and the intervention, aggressive infection control intervention including active microbial surveillance during outbreak investigation, active microbial surveillance for patients in the same room once a patient with VRE colonization or infection was identified. We also described the impact of hospital-wide hand hygiene program on overall infection rate and MRSA infection rate. The number of adverse events investigated increased initially when infection control persons increased and decrease in number and proportion of those due to classic nosocomial pathogens thereafter. We also described current status of infection due to epidemiologically important organisms in respiratory care units and a nursing home. We also survey using two questionnaires (one for 142 infection control persons and one for infection control persons from 24 hospitals) to understand current status of infection control manpower, infection control strategies, limitation of applying infection control strategies and recommendations. This study demonstrated that infection control interventions reduced adverse events and nosocomial transmission of multidrug resistant organisms and decreased infection rates. As nosocomial infection was associated with prolonged hospital stay and increased medical resources, investment in infection control is worthwhile.