

LONDON, 10 December 2010 - A first of its kind review of all available scientific data on **health-care associated infections**
in countries with limited resources shows this is a major patient safety problem in the developing world and indicates that
**better surveillance and reporting is essential**
to understand the magnitude of the problem and address it,
**according to a new study**
**published today in**
***The Lancet***
.

These infections can prolong hospital stays, create long-term disability, increase resistance to life-saving medications, drive up costs for patients and their family, and even lead to death.

Although health-care associated infections are estimated to affect hundreds of millions of people globally, precise numbers remain unknown because of the difficulty in gathering reliable data worldwide. While national surveillance systems exist in many high-income countries, they are non-existent in the vast majority of middle- and low-income countries.

"Health-care associated infections have long been established as the biggest cause of avoidable harm and unnecessary death in the health systems of high income countries. We now know that the situation in developing countries is even worse. There, levels of health-care associated infection are at least twice as high," says Dr Benedetta Allegranzi, Technical Lead for the Clean Care is Safer Care prog ram me at the World Health Organization and author of the study. "One in three patients having surgery in some settings with limited resources becomes infected. Solutions exist, and the time to act is now. The cost of delay is even more lives tragically lost."

Several factors increase the risk of health care-associated infections, including:

- poor hygiene and waste disposal,

- inadequate infrastructure and equipment,
- understaffing,
- overcrowding,
- lack of basic infection control knowledge and implementation,
- unsafe procedures, and
- a lack of guidelines and policies.

At the moment, however, there is no system in place in low- and middle-income settings to determine the likelihood and magnitude of the risk of infection associated with each of these factors.

"The number of health care-associated infections should be much lower in high-income countries, because we know what works and we have the means to act. Low- and middle-income countries face many more challenges, but this does not mean the problem is insurmountable. Several interventions are simple and low-cost," says Professor Didier Pittet, Head of the Collaborating Centre on Patient Safety at the University of Geneva Hospitals and author on the *Lancet* study.

Implementing system-wide surveillance, training, education and good communication, using devices appropriately and following proper procedures, and ensuring optimal hand hygiene practices are some of the solutions that must be tailored to the reality of these settings. To be successful, these solutions ultimately require a change of health-care workers' behaviour - in all settings.

Surveillance is key to the reduction of health care-associated infections. Not only can it point to some issues which can be immediately addressed, it also enables facilities and public health authorities to understand the magnitude of the problem and what interventions are needed, and to assess their impact.

Related links: **http://press.thelancet.com/hcinfec.pdf**