EVALUATION OF SURGICAL SITE INFECTION IN ABDOMINAL SURGERIESIN THE DEPARTMENT OF GENERAL SURGERY IN A TERTIARY CARE CENTRE- AN OBSERVATIONAL STUDY.

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Abstract

Background: Surgical site infection is increasingly recognized as a measure of the quality of patient care by surgeons, the incidence of SSI in our environment is still high when compared to the developed world.

Objectives: This study was conducted to evaluate the incidence, risk factors and the types of Surgical

SiteInfection(SSI)inpostoperativeabdominalsurgeries.Methods: Immediate postoperative period of the patients was followed up. Wound was examinedon

day 2, then everyday till the day of discharge. Signs of SSI were looked for. If the patient developed SSI in this period, then type of SSI was classified and swab culture was performed to identify the microorganism and antibiotic sensitivity pattern. CDC (Centre for disease Prevention and Control) criterion was used for diagnosis and classification of SSI. Patient was treated and discharged. All the

details were recorded in the proforma. The patients were followed up every week till 30 days. Results: The SSI rate in our study was 14% and risk factors associated with SSI in our study are smoking (p=0.001), preoperative stay of> 3days (p=0.000), ASA score (p=0.001), contaminated and dirty wound (p=0.000), duration of surgery (p=0.010) and duration of drain placement (p=0.000). Conclusion: Our study prompts us to look at the gaps in our surgical and infection control protocols

which will enable policy formulation that will foster a reduction in wound infection rate. SSI can be reduced by decreasing the preoperative hospital stay, appropriate antibiotic administration policies,

adequate preoperative patient preparation, reducing the duration of surgery to minimum, judicious

of drains and intraoperative maintenance of asepsis and following operation theatre discipline properly.

Keywords:

Abdominal surgeries ASA Score Glycemic control Surgical Site Infection (SSI)