

Surveillance of nosocomial infections in Dr. Cipto Mangunkusumo National General Hospital, Jakarta, 1999-2002

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Abstrak

Infeksi nosokomial merupakan salah satu masalah utama di rumah sakit yang berkaitan dengan morbiditas, mortalitas dan peningkatan biaya kesehatan. Surveilans sebaiknya dilakukan berkala untuk mendapatkan data tentang insiden infeksi nosokomial, jenis infeksi, patogen dan pola resistensi. Kami melaporkan hasil surveilans nosokomial di Rumah Sakit Umum Pusat Nasional (RSUPN) Dr. Cipto Mangunkusumo, Jakarta, antara tahun 1999 hingga 2002. Data didapatkan dari surveilans yang dilakukan oleh Panitia Pengendalian Infeksi Rumah Sakit. Surveilans dilakukan terhadap pasien dengan risiko infeksi nosokomial seperti menjalani prosedur bedah, kateter urin, kateter vena perifer atau sentral, ventilator dan prosedur invasif lainnya. Kriteria infeksi nosokomial yang digunakan berdasarkan Pedoman dan Petunjuk Teknis Panitia Pengendalian Infeksi Nosokomial RSUPN Dr. Cipto Mangunkusumo tahun 1999 yang mengacu pada definisi CDC mengenai infeksi nosokomial. Insiden infeksi nosokomial pada tahun 1999, 2000, 2001 dan 2002 adalah 1,1;0,9;0,6 dan 0,4 %. Jenis infeksi nosokomial mencakup infeksi kateter, luka operasi, saluran kemih dan saluran pernapasan berkisar antara 0 hingga 5,6 %. Bakteri Gram negatif terdiri dari *Pseudomonas* sp, *Enterobakter aerogenes*, *Escherichia coli*, *Proteus mirabilis* merupakan patogen tersering. Bakteri Gram positif terdiri dari *Staphylococcus epidermidis*, *Stafilokokus aureus* dan *Streptokokus anhemolitikus*. Didapatkan pada surveilans ini kecenderungan insiden infeksi nosokomial bakteri Gram positif. Sebagian besar bakteri Gram negatif telah resisten terhadap penisilin, amoksisilin-asam klavulanat dan sefalosporin generasi ke-3, tetapi masih sensitif terhadap sefalosporin generasi ke-4 dan aminoglikosida. Bakteri Gram positif masih sensitif terhadap penisilin, amoksisilin-asam klavulanat, sefalosporin generasi ke-4 dan aminoglikosida. (Med J Indones 2004; 13: 107-12)

Nosocomial infection are one of the main problem in hospital which are associated with significant morbidity, mortality and increased economic cost. Surveillance should be attempted regularly to obtain local data of incidence of nosocomial infections, types of infection, pathogen and resistance pattern. We reported the results of nosocomial surveillance in Dr. Cipto Mangunkusumo National General Hospital, Jakarta, in year 1999 to 2002. The data were obtained from surveillance, conducted by Nosocomial Infection Control Committee. Surveillance were performed to patient in risk of nosocomial infections such as underwent surgical procedure, urinary catheter, peripheral or central venous catheter, ventilator and other invasive procedure. Criteria for nosocomial infection which were used, based on technical guidelines of nosocomial infection in Dr. Cipto Mangunkusumo National General Hospital, year 1999; which referred to CDC definition of nosocomial infections. Incidence rate of nosocomial infections in year 1999, 2000, 2001 and 2002 were 1.1, 0.9, 0.6 and 0.4 % respectively. Type of nosocomial infection include catheter related, surgical wound, urinary tract and respiratory tract infections, ranged between 0 to 5.6 %. Gram negative bacteria consist of *Pseudomonas* sp, *Enterobacter aerogenes*, *Escherichia coli*, *Proteus mirabilis* were the most common nosocomial pathogen. Gram positive bacteria consist of *Staphylococcus epidermidis*, *Staphylococcus aureus* and *Streptococcus anhemolyticus*. Trend of increasing incidence of Gram positive

nosocomial infection also showed in our surveillance. Mostly Gram negative bacteria had been resistant to penicillin, co amoxicillin-clavulanic acid and 3rd generation cephalosporin, but still sensitive to 4th generation cephalosporin and aminoglycoside. The Gram positive bacteria were still sensitive to penicillin, co amoxicillin-clavulanic acid, 4th generation cephalosporin and aminoglycoside. (Med J Indones 2004; 13: 107-12)