

**Multi-hospital point-prevalence survey of health care-associated infections in
critical adults in State Minas Gerais**

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Abstract

Healthcare-associated infections (HCAIs) represent a real public health problem in developing countries which harbour social inequalities and variations in the complexity of healthcare. In the study, we describe the results of a point prevalence survey conducted in 2016, in adult intensive care units (ICU) of hospitals with different sizes in the state of Minas Gerais. A one-day point-prevalence survey in 2016 enrolled 28 (84.8%) ICU of hospitals from the twelve mesoregions located in the state of Minas Gerais, Brazil. Hospitals were classified as university hospital with > 400 beds, university hospital with 201-400 beds, university hospital with < 200 beds, non-university hospital with 201-400 beds and non-university hospital with ≤ 200 beds. HCAIs were defined according to ANVISA. Trained nurses visited each ICU and collected data on HCAIs, antimicrobial use and invasive procedures. Univariate methods were used for data analysis. In total, the hospitals had 371 beds of ICU, of which 303 were occupied at the time of the study. The overall HCAI prevalence was 51.2% (155/303 patients) and the infection rate acquired in the ICU was 79.4%. Of the 188 infected patients, including those with a community infection, 217 episodes were observed, of which 118 presented microbiological criteria, mainly in university

hospitals (71.7%). Most frequent infection sites were lung (53.0%) and blood (27.6%). 147 bacterial isolates were cultured from HCAs, most frequently non fermenters gram negative, mainly *Pseudomonas aeruginosa* (20/76 Gram-negative [26.3%]), *Acinetobacter baumannii* (18/76 [23.7%]) followed by *Staphylococcus aureus* (25/61 Gram-positive [41.0%]). The strongest risk factors for HCAI acquired in ICU were use invasive devices, mainly central venous catheter and intubation; exposure to antibiotics and empirical antimicrobial therapy. A high prevalence of HAIs was observed, mainly caused by non-fermenting Gram-negative bacteria associated with pneumonia. This in combination with a high rate of antimicrobial use illustrates the urgent need HCAs must be a priority in the public health agenda of Brazil.

Key words: healthcare-associated infections, ICU, epidemiology, prevalence survey, Brazil