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## Benchmarking of healthcare-Associated infections in Gulf Cooperation Council (GCC) states

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**Statement of the problem:** Although there are few international benchmarks for the healthcare-associated infections (HAI), several methodological and logistic issues make the use of such benchmarks unfair. It has been long suggested to establish a local benchmark for Gulf Cooperation Council (GCC) states that consider the challenges of the newly established regional surveillance programs. The purpose of this project was to set a GCC benchmark to promote standardized surveillance in the hospitals of the GCC countries.

**Methodology:** The GCC Center for Infection Control located in Riyadh (Saudi Arabia) did several activities to promote standard surveillance methodology for the GCC countries. This included publishing a surveillance manual, creating unique data collection forms, organizing multiple educational and training activities, and data auditing and validation on-site visits. Aggregate HAI surveillance data were pooled from 6 hospitals in three GCC countries; Saudi Arabia, Oman, and Bahrain. Standardized infection ratio (SIR) of HAIs in GCC hospitals were calculated using published reports of the US National Healthcare Safety Network (NHSN) and International Nosocomial Infection Control Consortium (INICC).

**Findings:** We have published major benchmarking reports on ventilator associated pneumonia (VAP) and catheter-associated urinary tract infections (CAUTIs) in the American Journal of Infection Control. A third report about central line-associated bloodstream infections (CLABSI) is in the process of publication. A common finding from the three reports confirm that the risk of HAIs including VAP, CAUTI, and CALBSI in GCC countries is higher than pooled U.S. VAP rates but lower than pooled rates from developing countries participating in the INICC.

**Conclusion & significance:** Although we have accomplished a distinguished step towards setting a regional benchmark, more efforts are still needed to improve regional collaboration in HAI surveillance activities. We are currently working on recruiting more facilities to submit data for future larger-scale benchmarking reports on HAIs and antimicrobial resistance.

### Biography

Aiman El-Saed is MD physician from Egypt who had PhD and MPH in epidemiology from the University of Pittsburgh, Pennsylvania, USA in 2004. Worked as a researcher at the University of Pittsburgh for 3 years between 2004 and 2007. Currently working as Assistant Professor of Epidemiology & Biostatistics at the College of Public Health and Health Informatics of King Saud bin Abdulaziz University for Health Sciences (Riyadh, Saudi Arabia). He is also working as advisor of health surveillance at the infection Prevention & Control Department, National Guard hospital, Riyadh, Saudi Arabia. He is serving as primary or co-investigator of several research grants. He had a strong epidemiologic and statistical research experience.

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