

Antibiotics 2019: Hospital-acquired infections in Ukraine

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Presentation: According to WHO, roughly 15.0% of all hospitalized patients experience the ill effects of Hospital-Acquired

Contamination (HAIs). Information from USA and Europe show 1,3% to 2,03% instances of HAIs in hospitalized patients. In Ukraine - 5-7.000 demonstrated instances of HAIs and 500.000 unregistered cases every year. One of the strategies to forestall HAIs is control technique in Intensive consideration unit (ICU), where last-line anti-infection agents are right now utilized.

Objective: To characterize range of microbial greenery and antimicrobial affectability of HAIs in some ICU in Lviv city, Ukraine.

Techniques: It was examined 124 clinical materials from 60 patients at the open emergency clinics in Lviv during July 2018 - May 2019. Were disconnected 144 strains of pathogenes. HAIs was characterized as disease that showed up in tolerant later than 48 hours after emergency clinic confirmation. Causative bacterial strains were confined and recognized utilizing bacteriological technique (Mueller Hinton Agar, Blood Agar, Saburo Agar, particular and differential media CHROMID*VRE, CHROMID*MRSA SMART, CHROMID*Candida and so forth. (Biomerieux)) and biochemical tests MIKRO-LA-TEST NEFERMtest24,

CANDIDAtest21, STAPHYtest24 and so forth. (ErbaLacema). Anti-infection affectability test was finished by Kirby-Bauer procedure. (9,7%), *Pseudomonas aeruginosa* (24.2%), *Streptococcus* spp. (2.4%), MRSA (3,2%), *Candida albicans* (8.1%). There were a few kinds of HAIs which are once in a while established, for example, *Staph.simulans*, *Staphylococcus gallinarum*, *putida*, *Candida dubliniensis*, *Candida membranifaciens*, *Candida glabrata*. Hostile to microbial affectability evaluation demonstrated that more than 90.0 % microorganisms were multidrug opposition (MDR). 75% of strains were atypical strains (T-file $\geq 0,25$).

End: In the period of anti-infection agents HAIs are as yet wild. Most instances of HAIs in Ukraine are not perceived as scourges. More than 90.0 % microbes are MDR and a large portion of them are atypical strains. Demonstrative abilities show various uncommon types of microorganisms that cause nosocomial diseases. It is imperative to utilize this reality at the point when one endeavors to structure counteraction or control procedure to lessen HAIs either at WHO level, or at the degree of neighborhood social insurance unit.

Affirmation: We thank executives of the medical clinics and ICU groups.

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