

论著
难愈性创面感染耐甲氧西林金黄色葡萄球菌危险因素

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摘要:

目的探讨难愈性创面感染耐甲氧西林金黄色葡萄球菌(MRSA)的危险因素,为临床防控提供依据。方法对2006年1月—2013年12月某院烧伤外科难愈性创面分离出金黄色葡萄球菌患者的临床资料进行分析,根据细菌是否为甲氧西林耐药菌和是否来源于难愈性创面分为4组,分析难愈性创面感染MRSA的危险因素及其持续存在的危险因素。结果共112例创面分泌物标本培养出金黄色葡萄球菌,难愈性创面MRSA组与难愈性创面甲氧西林敏感金黄色葡萄球菌(MSSA)组患者在住院时间、近期使用侵入性操作和近期使用抗菌药物治疗3个方面比较,差异具有统计学意义(均 $P<0.05$);非条件logistic回归分析显示,住院时间 >30 d(OR 95% CI: 1.14~30.69)和近期有侵入性操作(OR 95% CI: 1.41~17.84)是难愈性创面MRSA感染的独立危险因素。难愈性创面MRSA组与非难愈性创面MRSA组患者在既往MRSA感染史、创面深度、近期手术治疗和近期使用抗菌药物治疗4个方面比较,差异具有统计学意义(均 $P<0.05$);非条件logistic回归分析结果显示,近期使用抗菌药物治疗(OR 95% CI: 2.080~26.800)是难愈性创面MRSA感染持续存在的独立危险因素。结论缩短创面感染患者住院时间、减少侵入性操作和合理使用抗菌药物有助于防控难愈性创面患者感染MRSA。

关键词: 烧伤 创面 难愈性 金黄色葡萄球菌 耐甲氧西林金黄色葡萄球菌 危险因素 医院感染 感染控制

Risk factors for methicillin resistant Staphylococcus aureus infection of refractory wound

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Abstract:

Objective To explore the risk factors for methicillin resistant Staphylococcus aureus (MRSA) infection of refractory wound, and provide reference for clinical prevention and control. Methods Clinical data of patients who were isolated Staphylococcus aureus (SA) from wound at the burn ward in a hospital from January 2006 to December 2013 were analyzed, patients were divided into four groups according to whether the isolated SA were MRSA and whether SA were from refractory wound or from non refractory wound. Risk factors for MRSA infection of refractory wound were analyzed. Results A total of 112 isolates of SA were isolated from wound, statistical differences existed in the length of hospital stay, recent invasive operation, and recent antimicrobial use between patients in refractory wound MRSA group and refractory wound methicillin sensitive SA (MSSA) group (all $P<0.05$); non conditional logistic regression analysis revealed that length of hospital stay >30 days (OR 95% CI: 1.14-30.69) and recent invasive operation (OR 95% CI: 1.41-17.84) were independent risk factors for refractory wound MRSA infection. There were statistically differences in previous MRSA infection, burn depth, recent operation and recent antimicrobial use between refractory wound MRSA group and non refractory wound MRSA group (all $P<0.05$); non conditional logistic regression analysis revealed that recent antimicrobial use (OR 95% CI: 2.080-26.800) was independent risk factor for the persistence of MRSA infection of refractory wound. Conclusion Shortening the length of hospital stay, reducing invasive operation, and using antimicrobial agents rationally are helpful for the prevention and control of MRSA infection of refractory wound.

Keywords: burn wound, refractory Staphylococcus aureus methicillin resistant Staphylococcus aureu risk factor; healthcare associated infection infection control

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参考文献:

- [1] 倪俊.构建创面外科学教育体系的探析[J].西北医学教育, 2013, 21(3):450-452.
- [2] 倪俊,顾海峰,许献荣,等.烧伤外科病人再手术原因分析与预防[J].中国现代手术学杂志, 2012, 16(5):331-334.
- [3] 倪俊,顾海峰,许献荣,等.烧伤病房难愈性创面病原菌分布及耐药性分析[J].中国微生态学杂志, 2013, 25(2):184-186.
- [4] 丁群,李代清,王鸿华,等.糖尿病足患者感染耐甲氧西林葡萄球菌的危险因素分析[J].中华医学杂志, 2012, 92(4):228-231.
- [5] Nather A, Bee C S, Huak C Y, et al. Epidemiology of diabetic foot problems and predictive factors for limb loss [J]. J Diabetes Complications, 2008, 22(2):77-82.
- [6] James G A, Swogger E, Wolcott R, et al. Biofilms in chronic wounds [J]. Wound Repair Regen, 2008, 16(1):37-44.
- [7] 杨长顺,刘文恩,廖经忠,等.耐甲氧西林金黄色葡萄球菌感染的流行病学研究[J].中国感染控制杂志, 2009, 8(2):77-81.
- [8] 舒明.医院MRSA感染危险因素研究[J].中国感染控制杂志, 2010, 9(3):160-163.
- [9] 郭利平.耐甲氧西林金黄色葡萄球菌的研究进展[J].中国感染控制杂志, 2012, 11(1):78-80.
- [10] Hawkins C, Huang J, Jin N, et al. Persistent Staphylococcus aureus bacteremia: an analysis of risk factors and outcomes [J]. Arch Intern Med, 2007, 167(17):1861-1867.
- [11] Liebowitz L D, Blunt M C. Modification in prescribing practices for third generation cephalosporins and ciprofloxacin is associated with a reduction in methicillin resistant Staphylococcus aureus bacteraemia rate [J]. J Hosp Infect, 2008, 69(4):328-336.
- [12] 倪俊,顾海峰,许献荣,等.烧伤病房不同病种患者创面病原菌分布及耐药性对比研究[J].中华医院感染学杂志, 2013, 22(19):4832-4834.

本刊中的类似文章

1. 陈蜀岚,陈先云.地震伤员救治中的医院感染管理工作 FREE[J].中国感染控制杂志, 2010,9(1): 57-58
2. 李晖,高晓玲,钟巧,王晨虹,林春燕.手卫生干预促进措施及效果评价 FREE[J].中国感染控制杂志, 2009,8(6): 426-429
3. 许亚茹,尚秀娟,李冬霞.新生儿重症监护室医院感染管理现状 FREE[J].中国感染控制杂志, 2010,9(4): 287-288
4. 单亮,李秀,刘霞,何宏,李静,李道弟.神经重症监护室下呼吸道感染患者痰分离病原菌及其耐药性监测[J].中国感染控制杂志, 2010,9(5): 357-360
5. 闫沛,李武平,周琴,王蕾,李双,白艳玲.烧伤创面病原菌定植及其危险因素[J].中国感染控制杂志, 2011,10(3): 194-197
6. 张炜敏^{1,2},何广学²,洪峰³.医疗卫生机构医务人员结核感染控制现状[J].中国感染控制杂志, 2011,10(4): 248-251
7. 李晖,钟巧,高晓玲,靳淑雁,刘珺,林春燕.某妇幼保健院医院感染横断面调查[J].中国感染控制杂志, 2013,12(3): 229-230
- 8· 范珊红¹,许文¹,慕彩妮¹,李颖¹,戈伟¹,尚洋¹,索瑶².陕西省30所医疗机构医务人员锐器伤调查[J].中国感染控制杂志, 2013,12(4): 251-255
- 9· 杨舒,范学工.WHO:新SARS样病毒出现患者传护工案例[J].中国感染控制杂志, 2013,12(3): 238-238
- 10· 邓惠妍,卢彩华.浓缩透析液盛装容器清洗消毒研究进展[J].中国感染控制杂志, 2013,12(3): 239-240
- 11· 刘兆娥,韩波,杨波.极低出生体重儿医院感染及其危险因素[J].中国感染控制杂志, 2013,12(4): 263-266
- 12· 许燕卿,罗盛鸿,廖珊,谢向红,张秀平.妇科恶性肿瘤患者导尿管相关性泌尿道感染危险因素分析[J].中国感染控制杂志, 2013,12(4): 267-270
- 13· 任南,文细毛,吴安华.全国医院感染监测网对持续血液透析患者丙型肝炎病毒感染现况调查[J].中国感染控制杂志, 2011,10(6): 412-415
- 14· 吴旭琴,冯薇,乔美珍,刘月秀,金美娟,吴琛.2007—2010年金黄色葡萄球菌临床分离与耐药变迁[J].中国感染控制杂志, 2012,11(1): 55-58
15. 黄荔红,游荔君,王佳,吴霞霞,刘玉光.手术部位感染回顾性调查及危险因素分析[J].中国感染控制杂志, 2013,12(2): 97-100