

Evaluations of needle stick people working in great oil hospital of Ahvaz for 4 years (2008-2011)

Kalantari Farhad¹, Salamanzadeh.Shokrollah², Sarami Abdollah³, Salehi Seyedparviz⁴, Mooresh. Fariba⁵

Anesthesiologist 2- Infectious specialist 3- Infectious disease MPH specialist 4- General physician 5- Infection control Nurse, Department of health and great oil hospital

Abstract: Needle stick injury, a wound that pierced the skin with a needle tip is caused by common tools. It may also be caused by sharp tools. The common people who have had contact with the needle in the treatment works is like a wound that the medical community. This happened because the risk of disease transmission are concerned lies in the blood such as hepatitis B virus (HBV), hepatitis C virus (HIC), the AIDS virus (HIV). Despite the importance of the event, but the needle stick injuries have been neglected, and often not reported. In a study on 650 nurses and midwifery personnel services were 50 cases (7%) were reported needle stick. Mostly in the age group 29-47 years. 17 cases (34%) men and 33 cases (66%) were women between people. The most common causes of needle stick in people under the cover of this pricing needle in 37 cases (74%) and non use of personal protective equipment and spill into the conjunctively secretions of infected people, medical personnel in 5 cases (10%) cases and in 8 cases (16 %) was caused by rupture with a scalpel.

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Key words: Recap, Needle stick, great oil hospital

1. Introduction

Medical personnel have the potential risks of needle stick contaminated medical personnel is. More than 20 diseases through contaminated needles and other sharp instruments contaminated with blood contaminated surgical blade can cause the disease to medical personnel. Transmission is a concern of people employed in these professions. The main diseases transmitted through tears and with a blade or a needle dipped in the blood of people infected with hepatitis B and C and AIDS are.

Transmission of blood-borne viruses such as HIV and hepatitis are individuals exposed to the immune system.

Transmission through hollow needles, using IVlines - phlebotomy needles - Butterfly needles carries the highest risk.

High percentage of needle stick Failure to follow standard precautions needle occurs. In this study, most cases of needle stick through the lid re-investment and non use of personal protection and spill discharge medical personnel in the conjunctiva of the eye.

The aim of the study

- A. Being employed to identify the causes of needle stick.
- B. Decisions necessary to prevent its occurrence. (These incidents are preventable.)

2. Results

Unfortunately, all therapeutic categories, including doctors, nurses and operating room personnel and ... Re-pricing of caps and splashing into the conjunctively secretions were exposed. The non use of personal protective equipment such as (Shield) is also one of the other important causes.



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95% of personnel trained and familiar with personal protective equipment are available to them.

The interview was needle stick (fatigue, crowding emergency, and in many cases where the rash exposed to the agent should have.)

All groups that have been in contact with the infection: full vaccination coverage was..Incomplete vaccination one of the laboratory personnel and the level of antibodies was over 20.

Operating room personnel and physicians with a suture needle or have emergency contact with needle, catheters and re-cap investments; particularly in emergency patients during CPR has been a call agent.



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To prevent the risk of potential infection control committee with the chairman of the hospital were the following:

- *Instructions for safe injections, according to national guidelines*
- *Poster and administrative measures to deal with cases of infected*
- *Profile of patients documented to record all needle stick.*

Needle stick injury, a wound that pierced the skin with a needle tip is caused by common tools. It may also be caused by sharp tools. The common people who have had contact with the needle in the treatment works is like a wound that the medical community. This happened because the risk of disease transmission are concerned lies in the blood such as hepatitis B virus (HBV), hepatitis C virus (HCV), the AIDS virus (HIV). Despite the importance of the event, but the needle stick injuries have been neglected, and often not reported.

A. Event

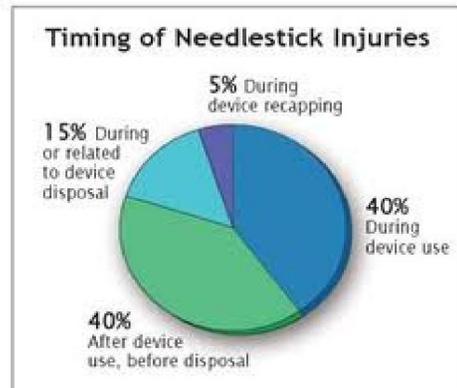
In the treatment of wounds events needle stick. This makes the transmission of viruses from one carrier to the recipient. This usually happens when they finally put in a container lid for needles and sharp objects occur. During surgery, the surgical needle may inadvertently penetrate the gloves and a surgical team in the skin. The influence of surgical and utility knives or other sharp instruments in the surgeon's skin, except for needle stick injuries are classified. Surgical knife wound care requires more than a needle stick. The medical community is not limited just to needle stick injuries and possible exposure to risk in any environment tools, exist.

This happened in 1999 in the United States is estimated at 800 thousand cases. In another study, about 3.5 million cases worldwide statistics are mentioned. The caring staff of nurses and doctors in their training period includes most of all. Within the field about the main difference is the risk of needle stick injury rate: the surgical, anesthesia, ear, nose and throat, internal medicine and dermatology, radiology

and pediatrics and a relatively high and are relatively low.

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Wounds from needle stick not only May the primary tools sharp spread, but they may after a period with needles that carried the dried blood has also spread to occur. The power of HIV and HCV in hours reduced, but HBV is resistant to drying and for more than a week can cause infection.



When wounds needle stick handling of the potential for such as bacteria, single cells, viruses (HIV, HBV, HCV) be important that once a year is estimated at 66,000 infected with HBV and 16,000 cases with HCV, 1000 and by of HIV. In addition to needle stick injuries may be a major stress or anxiety can lead to personal injury. Care and treatment of needle stick injuries are expensive and nearly \$ 2,500 in a short time in the United States has been estimated.

In most cases of needle stick injury occurs when a person is not carrying any virus, so no risk of any infection. Despite the stress and anxiety caused the symptoms to prevent the separation takes place.



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B. Prevention & Management

In the latter involves the use of tools to get the needle (instead of fingers), the performance of surgical utility knives, sharp tools to prevent hands to carry. Engineering advances - including the development of safe and away about safe needle shedding. There is a

surgical suture to the thick edge of needles; needle stick may be used to reduce ulcers.

After the needle stick must injury the important procedures that must be done to reduce the risk of recipient infection. Is that the damage should be washed with soap and water. The operation of the affected area to push more blood to leak out is wrong and by the Centers for Disease Control (CDC) has been commissioned. Laboratory tests for a basic account of the damage can be attributed to HIV and hepatitis, acute HAV IgM, HBsAg, and HB core IgM, HCV, and for safety, surface antibodies. Unless the situation should be known before the tests HBsAG, anti-HCV antibodies should be carried HIV.



<http://www.speedsmedical.co.uk/product/81197f5f-7042-47d5-9e22-456951cdf368.aspx>

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