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ABSTRACT BOOK

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Distribution of Invasive Device Associated Infections Rates and Device Utilization Ratios According to Distribution of Intensive Care Units, 2008-2012

ICU	CL-U*	CLA-BSI*	UC-U*	CA-UTI*	MV-U*	VAP*
Anesthesia-Reanimation ICU	0.80	4.70	0.99	3.25	0.71	6.81
Emergency ICU	0.23	3.42	0.92	0.75	0.23	4.92
Respiratory ICU	0.27	8.87	0.04	3.58	0.33	17.33
Norology ICU	0.30	2.25	1.0	6.80	0.13	8.28
Total	0.40	4.5	0.96	3.59	0.33	8.9

ICU: Intensive care unit, CL-U*: Central line utilization rate=number of CL-days/Number of patient days, CLA-BSI*: Central line associated blood system infection rates per 1,000 central line-days, UC-U*: Urinary catheter utilization rate=number of UC-days/Number of patient days, CA-UTI*: Catheter associated urinary system infection rates per 1,000 urinary catheter-days, MV-U*: Mechanic ventilatory utilization ratio=MV-days/Number of patient days, VAP*: Ventilatory associated pneumoniae rates per 1,000 ventilator-days



Seasonal Variation of Endemic Strains of Acinetobacter Baumannii Isolated from Intubated Surgical ICU patients

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There are data for seasonal variation in Acinetobacter isolation rates, mostly connected with periods of high humidity, though some strains can survive for long periods under dry conditions. There are lots of studies reported high incidence of its isolation in late summer months as in early winter months.

The aim of this study was to recognize Acinetobacter baumannii seasonal variation in KARIL Skopje, in correlation with local climate changes.

Laboratory data from computer software program were monitored on daily basis, in period from 2010 to 2012. 257 strains of Acinetobacter baumannii isolated from cannulas and tubes were counted for monthly distribution in a year. Seasonal index was estimated and compared with the average humidity of the air and temperature changes. The average year temperature for city of Skopje is 12 °C and the average humidity of the air is 65,7% per year. The average burden of the weather monthly mean temperature are in March (2,1 °C), October (1,1 °C) and December (1,1 °C). The highest humidity of the air was estimated in winter (79,3%) and consequently in autumn, spring and summer. The climate parameters correspond with seasonal index of Acinetobacter baumannii for investigated 3 year period. The spring and winter to be the most critical seasons for acquisition of this microorganism. This can lead to conclusions for undertaking stronger global and specific precautions in the hospitals for the mentioned seasons to prevent acquisition of Acinetobacter baumannii.

Keywords: Acinetobacter baumannii, seasonal variation, ICU