



Infection in the Critically Ill: an Ongoing Challenge (Topics in Anaesthesia and Critical Care)

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Infections contracted by patients constitute an important factor in the management of any hospital unit. For patients with weakened resistance due to trauma, after surgery and in intensive care, infection-related complications have a negative impact on care quality indicators, specifically in terms of protracted hospitalisation time, increased costs from complications and extended hospitalisation, and increased mortality rate. Effective strategies to prevent and treat infections are a priority in optimising the cost-effectiveness of care. Infection control, diagnostics and targeted antibiotic therapy require an integrated epidemiological, microbiological and clinical approach. This is indispensable for critically ill patients, especially when the processes of infection and sepsis are supported by micro-organisms which are multidrug-resistant and difficult to root out. The importance of this subject has been demonstrated by a European observational study on the prevalence of hospital infections in patients under intensive care. In this study, the prevalence of infections contracted in a "high-risk" environment was 21 %, while other studies have observed that the incidence of pneumonia in patients undergoing artificial ventilation varied between 8% and 54%, with a median of 24%. These figures alone are enough to show the clinical importance of the infective process and the need for continuous interdisciplinary updating and exchanges of experience.

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