

THE ROLE OF THE ANTIBIOTICS IN THE WOUNDS' INFECTION

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Abstract

Surgical infection is called "*an infection which is the result of the surgical action or the result of the hospitalization if the surgery ward*". Although health systems vary in different countries, they fall into common denominator, that the presence of the surgical infection increases the cost of surgical service. The presence of the surgical infection is not also the cause of morbidity increasing but also the mortality increasing. The purpose of this study is: *the evaluation of the antibiotics role above the infection surgical site.*

The concept of the *surgical site infection* in itself means infections which touch and develop in the site, where the surgical intervention is performed and are divided into:

- a. Infections of operating wound
- b. Intracavitary and organ infections

The role of the antibiotics used for antibioprohylax (ABP). The role of the antibiotics used for antibiotherapy (ABT) in the wound infection.

Methods: In this study taken into consideration the operations carried out during the period of 1 September 2005 up to 31 March 2006 for strumectomi, Cholecystectomi and hernia Plastics of all types in totality-242 interventions. All these operations are carried out in the planning surgical wards at Regional Hospital of Shkoder which are controlled 3 times by the Hygiene and Epidemiological Department, in order to see their state of cleanness and hasn't resulted that there is an increase of germs. The antibiotic used in this study Cefasolin

which is administered by an iv dose of 2 grams in the period of anesthesia induction, or divided into 2 doses as antibioprohylax (ABP).

Results: During the time of this study are operated in totality 24 cases with *Struma*. From these, antibiotherapy (ABT) is not used in any case, antibioprohylax (ABP) is used only in one case for two days, ABP with two doses is used in two cases. ABP with only one dose was used in 12 cases and there were no antibiotics used in 9 cases. There was no wound infection in the group of intervention for colecystit were included in totality 82 cases divided into 51 cases with a wound probable contaminated and 31 cases with contaminated wounds. In the wound probably contaminated was used antibioprohylax (ABP) with a dose in 24 cases, ABP with 2 doses in 19 cases and antibiotherapy (ABT) in 8 cases. There was no wound infection. In the group with contaminated wounds ABT was used in 26 cases and ABP with two days in 5 cases. There were shown up three wound infections (two superficial wound infections and one deep infection). In the group of interventions for hernia (in totality 136 cases) in 40 cases was not used a Prolen nets while in 96 cases was used Prolen nets. From 40 cases without nets in three patients was used a dose ABP, whereas in 37 other cases was not used ABP at all.

In all these case there was no wound infections. In patients with hernia with Prolen (96 cases) was used ABP with one dose (48 cases), ABP with two doses (38 cases), with ABP in two days (1 case) and ABT (9 cases) where were noticed 4 infections.