

A STUDY OF METHICILLIN RESISTANT *STAPHYLOCOCCUS AUREUS* FROM PATIENTS IN THE PLASTIC SURGERY UNIT, GENERAL HOSPITAL KANDY: A PRELIMINARY REPORT

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Methicillin resistant *Staphylococcus aureus* (MRSA) has emerged as a significant nosocomial pathogen worldwide over the past 2 decades. Many experts in the field share the view that aggressive control efforts of MRSA are justified and adherence to basic infection control measures cannot be overemphasized in any MRSA control plan.

Patients with large, open wounds are particularly susceptible to colonization and infection with MRSA. A point prevalence study, conducted in the Plastic Surgery Unit, General Hospital, Kandy in October 2001 showed 55% of patients to be colonized with MRSA. Following that, ward staff was educated on transmission of MRSA and the importance of basic hand hygiene practices including the use of barrier precautions during wound care for MRSA (+) patients. Furthermore, during wound care, MRSA (+) patients were dressed after patients without MRSA. In addition, MRSA (+) patients were discharged from the ward as early as possible.

A 5-month surveillance study was carried out from mid June to mid December 2002 (excluding the period from mid August to mid September) in order to determine the percentage of MRSA (+) patients on admission to the unit, rate of nosocomial acquisition of MRSA in the unit and rate of infection by MRSA in the unit. All patients admitting to the unit were screened for MRSA by taking swabs from nose, throat, perineum and wounds. Weekly rescreening was carried out in a similar manner on patients who were warded for more than a week. Standard bacteriological techniques and the National Committee for Clinical Laboratory Standard (NCCLS) method of antibiotic sensitivity test were used for identification of MRSA. The following table shows the present MRSA status in the unit:

Monthly sampling period	Percent MRSA (+) on admission (%)	Rate of nosocomial acquisition (%)	Rate of infection by MRSA (%)
1	8.6	13.2	10.3
2	7.6	5.5	5.1
3	6.1	13	10.2
4	6.3	6.6	6.3
5	10.5	11.8	7.8

These figures are relatively low compared to previously obtained data from the same unit and other published data on MRSA in Sri Lanka.