One-Day Point Prevalence of Healthcare-Associated Infections and Antimicrobial Use in four Countries of Latin America.

Abstract

**BACKGROUND AND AIMS:**
Experience in the region shows that in some countries there is very good surveillance of HAI in health services, but there is no national data consistently in all countries. Therefore, we set to estimate the total burden of Healthcare-associated infections (HAIs) and antimicrobial use in acute care hospitals in Brazil, Venezuela, Mexico, and Colombia using the one-day point prevalence methodology.

**METHODS:**
The survey was conducted between June and July 2016. In each ward or unit, HAIs and antimicrobial use data was collected on a single day by a trained team of researchers. Also, for each patient, we collected data on risk factors for infections.

**RESULTS:**
One out of ten individuals surveyed had at least one healthcare-associated infection (HAI). Pneumonia and surgical site infections were the most relevant among the surveyed countries. Most of the surveyed participants, regardless of their HAI status, received antibiotics except the individuals managed in Brazil. Carbapenems and third-generation Cephalosporins were among the most frequently used antibiotics.

**CONCLUSION:**
Our results add to WHO's recent efforts to understand HAIs prevalence and antibiotic consumption in low and middle-income countries, of which we studied three that were not included in their last report.
Prevention of Fat Embolism: Anatomic Studies in Fresh Cadavers.

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Safe Water Community Project in Jalisco, Mexico.

Abstract

Few studies have assessed kidney function in patients with gastrointestinal infections in low-resource settings. Although dehydration is a frequent complication of acute diarrhea, we do not know the frequency and severity of acute kidney injury (AKI) in this context. A high prevalence of chronic kidney disease (CKD) has been reported among the inhabitants of poor communities in Poncitlán, Mexico. Polluted drinking water has been implicated as a probable cause. These communities report a high mortality associated with gastrointestinal infection. It is possible that a high incidence of waterborne disease and consequent more episodes of AKI might contribute to the high prevalence of CKD in this population. In this study, we aim to determine the association between the use of unsafe water and the incidence of acute diarrhea and AKI, and to determine if the provision of clean water decreases these complications. The study will be conducted in 3 communities of the municipality of Poncitlán. Initially, we will determine the water, sanitation, and hygiene (WASH) characteristics in the population and evaluate the incidence of diarrheal disease. In the observation phase, outcomes will be assessed after families receive training in WASH techniques, but before they are provided with clean water. In the intervention phase, outcomes will be assessed after clean water is provided.

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International Society of Nephrology 0 by 25 Project: Lessons Learned.

Abstract

Acute kidney injury (AKI) is a common disorder with a high risk of mortality and development of chronic kidney disease. With the validation of the recent classification systems, RIFLE in 2004 and KDIGO, in use today, our understanding of AKI has evolved. We now know that community-acquired AKI is also associated with an increased risk of worse outcomes. In addition, several epidemiological studies, including cohorts from low-income and low-middle income countries, have confirmed common risk factors for community-acquired AKI. In 2013, the International Society of Nephrology launched the 0 by 25 campaign with the goal that no patient should die from preventable or untreated AKI in low-resource areas by 2025 [Mehta et al.: Lancet 2015;385:2616-43]. The initial effort of the initiative was a meta-analysis of AKI epidemiology around the world. The second project of the 0 by 25 initiative, the Global AKI Snapshot (GSN) study, provided insights into the recognition, treatment, and outcomes of AKI worldwide [Mehta et al.: Lancet 2016;387:2017-25]. Following the GSN, a Pilot Project was designed to test whether education and a simple protocol-based approach can improve outcomes in patients at risk of community-acquired AKI in low-resource settings [Macedo: J Am Soc Nephrol 2017]. In this review, we will comment on the main findings and lessons learned from the 0 by 25 initiative.

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Molecular characterization and pathogenicity determination of hypervirulent Klebsiella pneumoniae clinical isolates serotype K2 in Mexico.

Abstract

Hypervirulent Klebsiella pneumoniae have been rarely described in Latin America. This work describes the characterization of hypervirulent K. pneumoniae isolates capsular serotype K2 belonging to sequence types 86 and 380. The assays showed the hypervirulent K. pneumoniae highly virulent, which is determined by the plasmid borne virulence genes. At this time, the hypervirulent K. pneumoniae clinical isolates in Mexico are extensively susceptible to antibiotics.

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Peristomal pyoderma gangrenosum: An exceedingly rare and overdiagnosed entity?

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