

of Methicillin Resistant Staphylococcus aureus (MRSA) in Burns Units.

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Abstract:

Results of four years' studies from a number of hospitals in Kenya have shown that nosocomial infections in burns units are due to Methicillin Resistant Staphylococcus aureus (MRSA). Through chromosomal DNA and plasmid DNA, the strain is highly resistant to sulphonamide ointment and other antibiotics. 90% of patients admitted in burns units get colonized or infected with MRSA. The strain prolongs the duration of patients in hospitals. The burns degenerate to second and third degree burns, thereby necessitating skin grafting. The environment has been found to be contaminated with this strain with some staff members having chronic throat infections. Minocycline was found to be effective in treating the infected staff members. Cleaning this environment with Sodium dichloroisocyanurate (precepts)/Sodium hypochlorite (JIK) reduced drastically the mechanical transmission of bacteria in the units. The duration of stay of the patient was reduced. This shows that MRSA which is spread in government and private hospitals can cheaply be controlled by the proper use of disinfectants, antiseptics, and use of effective antibiotics when necessary.