

# GI surgical site infections higher in low-income countries

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(HealthDay)—The burden of surgical site infection (SSI) after

gastrointestinal surgery is greater for countries with low income as classified by the U.N. Human Development Index (HDI), according to a study published online Feb. 13 in *The Lancet Infectious Diseases*.

Aneel Bhangu, M.B.Ch.B., from the University of Birmingham in the United Kingdom, and colleagues conducted a prospective study involving consecutive [patients](#) undergoing elective or emergency gastrointestinal resection. Countries with participating centers were stratified according to the HDI as high-, middle-, and low-income groups. Data were included for 12,539 patients from 343 hospitals in 66 countries.

The researchers found that 58.5, 31.2, and 10.2 percent of patients were from high-, middle-, and low-HDI countries, respectively. Within 30 days of surgery, 12.3 percent of patients had SSI; the incidence varied between countries with high, middle, and low HDI (9.4, 14.0, and 23.2 percent, respectively). In each HDI group, the highest incidence of SSI was after dirty surgery (17.8, 31.4, and 39.8 percent in high-, middle, and low-HDI countries, respectively). Patients in low-HDI countries were at the greatest risk of HDI after adjustment for risk factors (adjusted odds ratio, 1.60). Resistant infections were detected in 16.6, 19.8, and 35.9 percent of patients in high-, middle-, and low-HDI countries, respectively.

"Countries with a low HDI carry a disproportionately greater burden of SSI than countries with a middle or high HDI and might have higher rates of antibiotic resistance," the authors write.

One author disclosed receiving personal fees from KPMG Global Healthcare Practice.

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