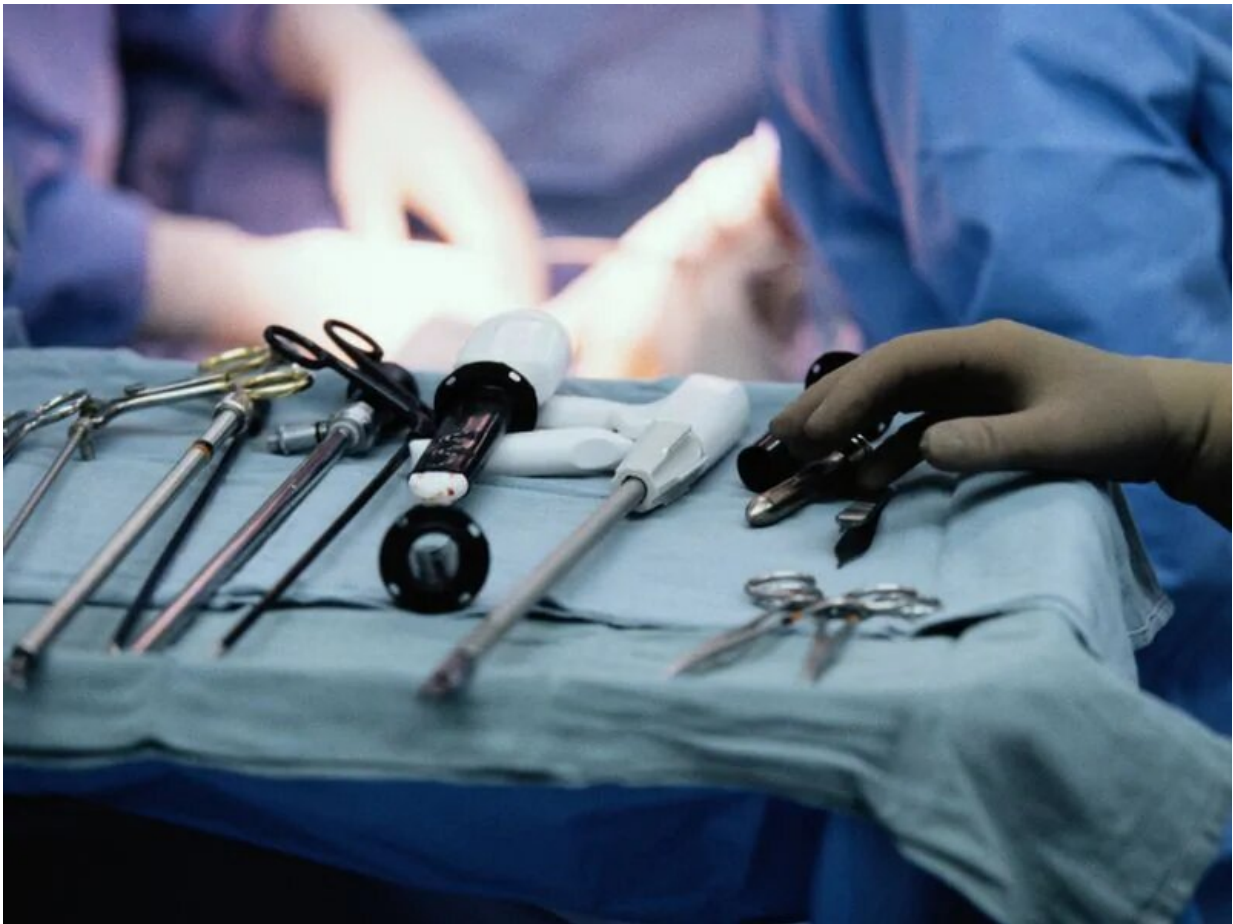


Early postop infection ups one-year infection, mortality risk

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(HealthDay)—Patients with 30-day postoperative infection have an

increased risk for long-term infection and mortality, according to a study published online Nov. 6 in *JAMA Surgery*.

William J. O'Brien, from the Center for Healthcare Organization and Implementation Research in Boston, and colleagues conducted a retrospective observational cohort study to examine whether exposure to 30-day [postoperative infection](#) is associated with the incidence of infection and mortality during postoperative days 31 to 365. Data were included for 659,486 veterans undergoing [major surgery](#).

The researchers found that 3.6 percent of the patients had a 30-day infection, 6.6 had a long-term infection, and 3.8 percent died during follow-up. Surgical site infection, [urinary tract infection](#), pneumonia, and bloodstream infection were the most frequent 30-day infections (40.2, 27.5, 14.8, and 8.0 percent, respectively). Urinary tract infection, skin and soft tissue infection, bloodstream infection, and pneumonia were included as types of long-term infection (48.7, 32.6, 8.8, and 5.8 percent, respectively). Compared with those without 30-day infection, patients in the exposure group had a higher observed incidence of long-term infection (21.8 versus 6.1 percent) and mortality (12.9 versus 3.4 percent). The estimated hazard ratios for long-term infection and mortality were 3.17 and 1.89, respectively.

"Infection after surgery is associated with long-term harm, which should be accounted for in the costs and benefits of [infection](#) prevention programs," the authors write.

Two authors disclosed financial ties to the biopharmaceutical and medical technology industries.

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