



# Research BULLETIN

International Council of Nurses • Conseil international des infirmières • Consejo internacional de enfermeras

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## ICN Research Network meeting at ICN Congress

The ICN Research Network met during the ICN Congress in Durban, South Africa, July 2009 and was attended by about 200 participants with diverse research interests.

Four presentations were given as follows:

- Hand hygiene to address infection rates including MRSA (Claire Kilpatrick, WHO).
- Experiences and activities in promoting research (Anne-Marie Mottaz, Nursing Research Association, ARSI)
- Impact of infection control practices in a major hospital (Carlo Colombo, Switzerland)
- Effectiveness of male circumcision in reducing HIV transmission in males (Peter Johnson, USA).

The presentations were followed by questions and a discussion on how the ICN Research Network can add value to the work of nurse researchers and nurses and focused on the following two questions:

- What are the research priorities in your setting/country and what should ICN be advocating at the international level?
- How could we stimulate involvement of Network members, e.g. contribution to the Bulletin, information for the Network web site, etc.

Participants indicated that more advocacy is needed to improve the visibility of nursing research at national and global level. There was interest in the work of the Research Network and a number of participants agreed to contribute to the Bulletin.

## Nurses seen as most honest professionals

Australians rate nurses as the most ethical and honest professionals. The Roy Morgan Image of Professions survey found that 23 fields had fallen in the public's estimation, the largest fall ever recorded. But nurses have again topped the annual list, with 89 per cent of those polled ranking them as the most honest and ethical.

Pharmacists came in second with 84 per cent support, and doctors third with 82 per cent. School teachers and dentists rounded out the top five.

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Car salesmen were again voted least honest and ethical, with only three per cent support, followed closely by those in advertising and newspaper journalists.

Given the economic downturn, business executives ranked poorly with only 16 per cent support, down five points on last year. Pollster Gary Morgan said the economic downturn had had a big impact on Australians' perceptions of the professions.

Source:

<http://money.ninemsn.com.au/article.aspx?id=824669>

### **Professional biological risk factors of health care workers**

Health care workers are at highest risk of biological factors, as they are daily exposed to body fluids. The risk of sharps injuries and exposure to blood is associated with blood-borne infections. A retrospective study was carried out from January to June 2006. Data were collected in the surgical departments of Hospital of Kaunas University of Medicine, Lithuania. An anonymous questionnaire was used to collect data.

The results showed that more than half (51.4%) of the respondents experienced sharps injuries; 62.1% were exposed to body fluids; and 39.6% of the health workers experienced both sharps injury and exposure. In all cases, the hands were most commonly affected during sharps injuries. Exposure of healthy skin and eyes to body fluids occurred in 63% and 20% of the cases, respectively.

The majority of exposures were blood splashes (60%). Physicians most frequently experienced sharps injury during surgery (79.3%); nurses during preparation of instruments (35.1%); and supporting staff when disposing of waste (75.8%). Commonly physicians were injured by surgical instruments (72.4%), nurses by needlestick (72.4%), and supporting staff by glass waste (60.6%). The majority of the respondents (86%) were not vaccinated with Hepatitis B vaccine. No personal protective

equipment was used by 14.5% of the respondents during sharps injuries.

Source: *Medicina (Kaunas)*. 2009;45(7):530-6.

### **Perceived knowledge of bloodborne pathogens and avoidance of contact with infected patients**

A cross-sectional study was used to examine the relationship between nurses' knowledge of bloodborne pathogens (BBPs), their professional behaviour regarding handwashing, compliance with standard precautions (SPs), and avoidance of therapeutic contact with BBP-infected patients.

Of the 180 participants, 159 (88.3%) were women with an average educational level of 16.40 years (SD=2.66). The mean age of the sample was 39.41 (SD=10.1). Data were collected using a structured questionnaire including sociodemographic information, level of knowledge concerning three blood-borne pathogens (BBPs): human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV), level of compliance with SPs, understanding of SP principles, and avoidance of therapeutic contact with BBP-infected patients.

The findings showed that levels of HIV-related knowledge were significantly higher than were those of HBV- and HCV-related knowledge. Only 96 participants (54.5%) stated that all patients should be treated as BBP carriers. The understanding of the basic principle of SPs did not influence the relationship between perceived knowledge and self-reported compliance with SPs; 77.3% of the sample reported that they avoid therapeutic contact with BBP-infected patients. The level of perceived knowledge did not contribute to the nurses' avoidance of care of BBP carriers.

The researchers concluded that perceived knowledge of BBPs has a weak effect on compliance with SPs and willingness to care for BBP-infected patients.

Source: *J Nurs Scholarsh*. 2009 Mar;41(1):13-9.

### **Impact of infection control rate of needle stick injuries**

A quality improvement project on impact of infection control activities was introduced in 2005 at the Aga Khan University Hospital in Pakistan in order to reduce needles stick injuries (NSIs). Health care workers were educated; surveillance data from 2002 to 2007 was analyzed and compared with various risk factors.

The results showed that during the study period 1382 incidents were reported. Junior doctors sustained the highest number of injuries (n = 394; 28.5%) followed by registered nurses (n = 283; 20.4%). The highest number of incidents were reported during blood collection (19%). An increasing trend was observed in the pre intervention years (2002-2004). However a noticeable fall was observed in the post intervention period (2006-2007). A major decline was noted among nurses (from 13 to 5 NSI/100 FTE/year). By relating and comparing the rates with various activities directly linked with the use of syringes, a significant reduction in incidents was found including hospital admissions (p-value 0.01), surgeries and procedures performed (p = 0.01), specimens collected in the laboratory (p = 0.001) and patients visits in clinics (p = 0.01).

The study reported a significant reduction in needle stick injuries especially during the post intervention study period achieved by constant emphasis on improving awareness by regular educational sessions, implemented as a quality improvement project.

*Source: summarised from Safe Injection Global network\* 29 July 2009*

### **Body-mass index and cause-specific mortality**

The Prospective Studies Collaboration aimed to investigate the association between body-mass index and cause-specific mortality in adults by sharing data from many studies. Collaborative analyses were undertaken of baseline BMI versus mortality in 57 prospective studies with 894,576 participants, mostly in Western Europe and North America (61%

[n=541,452] male, mean recruitment age 46 [SD 11] years, mean BMI 25 [SD 4] kg/m<sup>2</sup>). The analyses were adjusted for age, sex, smoking status, and study.

The findings showed that in both sexes mortality was lowest at about 22.5-25 kg/m<sup>2</sup>. Above this range, positive associations were recorded for several specific causes and inverse associations for none. The absolute excess risks for higher BMI and smoking were roughly additive, and each 5 kg/m<sup>2</sup> higher BMI was on average associated with about 30% higher overall mortality: 40% for vascular mortality; 60-120% for diabetic, renal and hepatic mortality; 10% for neoplastic mortality, 20% for respiratory and for all other mortality. Below the range 22.5-25 kg/m<sup>2</sup>, BMI was associated inversely with overall mortality, mainly because of strong inverse associations with respiratory disease and lung cancer. These inverse associations were much stronger for smokers than for non-smokers, despite cigarette consumption per smoker varying little with BMI. The study concluded that although other anthropometric measures such as waist circumference, waist-to-hip ratio could add extra information to BMI, and BMI to them, BMI is in itself a strong predictor of overall mortality both above and below the apparent optimum of about 22.5-25 kg/m<sup>2</sup>.

*Source: The Lancet, Early Online Publication, 18 March 2009 doi:10.1016/S0140-6736(09)60318-4.*

## **Conferences and Events**

### **Forum 2009: Innovating for the health of all, Havana, Cuba 16-20 November 2009**

Forum 2009 under the theme of *Innovating for the Health of All* is organised by the Global Forum for Health Research and will take place from 16-20 November in Havana, Cuba. This event will bring together leaders and experts from around the world to share ideas and forge new partnerships. It will include a mix of stakeholders from health and science ministries, research agencies and institutions, development agencies,

foundations, nongovernmental organisations, civil society, the private sector and media. Key discussion themes will include social entrepreneurship for health, public-private product development for neglected diseases, eHealth, knowledge-translation platforms, national health innovation systems, donor-country harmonization and coherence, and innovative financing strategies. To register and for further information visit: [www.globalforumhealth.org](http://www.globalforumhealth.org).

**Fourth European Nursing Congress  
2010, Rotterdam, Netherlands  
4-7 October 2010**

The Fourth European Nursing Congress including the 14<sup>th</sup> Research Congress of the Workgroup of European Nurse Researchers and the Flemish Dutch Scientific Nursing Congress will be held 4-7 October 2010 under the theme of Older

Persons: the Future of Care. For more information contact:  
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The **International Council of Nurses (ICN)** is a federation of more than 130 national nurses associations representing the millions of nurses worldwide. Operated by nurses and leading nursing internationally, ICN works to ensure quality nursing care for all and sound health policies globally.

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