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PNEUMONIA ASSOCIATE WITH MECHANICAL VENTILATION: PROFILE OF HOSPITAL INFECTION IN AN INTENSIVE CARE UNIT, RIO BRANCO-ACRE

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RESUMO

Lower respiratory tract infections represent one of the main complications acquired in the hospital environment, particularly pneumonia, which has the highest number of related cases. Among the risk factors associated with the development of the disease is mechanical ventilation, which is the therapy to which patients with some respiratory failure are subjected. The study aimed to analyze the microbiological and resistance profile of bacteria that cause hospital-acquired pneumonia associated with mechanical ventilation in the Intensive Care Unit of the Rio Branco Urgency and Emergency Hospital (HUERB) in the State of Acre. Laboratory results of positive tracheal aspirate cultures, bronchoalveolar lavage, and pleural fluid from patients undergoing mechanical ventilation collected in the ICU from January 2012 to December 2016 were analyzed. Notifications of Healthcare-Associated Infections (HAIs) made by the HUERB Hospital Infection Control Committee (CCH). 216 HAIs were reported from January 2012 to December 2016. The main bacteria isolated from the samples were *Pseudomonas aeruginosa*, *Acinetobacter baumannii*, and *Acinetobacter* sp., all non-fermenting Gram-negatives, characterized as opportunistic pathogens. The highest rate of resistance among the bacteria isolated was to cephalosporins, 63.4% for *Acinetobacter baumannii*, 62.6% for *Pseudomonas aeruginosa*, and 57.1% for *Acinetobacter* sp. The present data reiterate the public health challenges of reducing HAIs and controlling the evolutionary process of multi-resistance to antimicrobials in the main bacteria responsible for pneumonia associated with mechanical ventilation.

PALAVRAS-CHAVE: Bacteria, Nosocomial infection, multiresistant

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