

Healthcare-Associated Infections in the Country of Georgia

In the mountainous country of Georgia, the healthcare system is dominated by private corporations, which manage approximately 90% of the hospital beds. Rarely are healthcare personnel trained in infection prevention and control (IPC) practices such as hand hygiene and injection safety. Gaps in IPC practices can lead to widespread, healthcare-associated infections (HAIs) and outbreaks that could spread infectious diseases throughout Georgia and across borders, threatening global public health.

Beginning in June 2015, the International Infection Control Program in CDC's National Center for Emerging and Zoonotic Infectious Diseases, Division of Healthcare Quality and Promotion has been working with Georgia through a collaboration with the Division of Global Health Protection and the CDC South Caucasus Office. Together, they aim to:

- Establish a surveillance system for monitoring antibiotic resistance (AR) and HAIs.
- Establish national IPC guidelines.
- Strengthen public health and clinical laboratory capacity to diagnose AR and HAIs.

Prior to CDC's involvement in the country, Georgia's healthcare system did not systematically track HAIs or AR. Without such tracking, the health system underestimated the health and economic impact of HAI and AR infections in the country.

The emergence of AR, the inability of common antibiotics to treat infections, is driven by overuse and inappropriate use of antibiotics. AR is not only dangerous to patients in need of treatment for their infections, but it can also threaten the viability of antibiotics used to treat infections globally.



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As a first step in the partnership, the International Infection Control Program developed an HAI protocol for use in Georgian intensive care units and trained healthcare personnel in surveillance and data collection. Data from the five initial surveillance sites have been analyzed, and surveillance has been expanded to two additional units.

Strengthening laboratory capacity and using antibiotic stewardship to improve antimicrobial prescribing practices will improve the use of antibiotics and slow the emergence of AR in Georgia.

