ABSTRACT

The study aimed at assessing health workers knowledge and practices related to sharp injury prevention, and access to post exposure prophylaxis against HIV, so as to generate information that will be used by the DHT to strengthen occupational HIV exposure control programs in health units.

In Uganda, there is a high prevalence of sharp object injuries (57%) among health workers (M.O.H, 2003). 82.9% of the health workers in Semuto Health Centre IV in Nakaseke district had been exposed to potentially infectious fluids, this was mostly after percutenious injury and only 16.7% of these sought advice for PEP, despite the services being available in the two hospitals within the district (Nakaseke District HIV Monitoring and Evaluation Report, 2009).

The study was carried out in Nakaseke district on facility based health workers offering clinical care; cleaners were included, because their work involves handling and disposing of used infectious sharp objects.

The study was conducted between July and August 2011. It was a cross-sectional study that employed both quantitative and qualitative methods of data collection.

Quantitative data was analyzed using EpiInfo 3.3 version and Microsoft Excel 2007 statistical packages. Univariate, Bivariate and Multivariate levels of data analysis techniques were applied.

The major findings of the study were:

Over fifty six percent (56.2%) of health workers in Nakaseke district had ever experienced sharp injuries; most of the health workers that experienced sharp injuries (66.1%) were nurses/midwives, followed by nursing assistants (61.0%).

The majority of health workers (91.8%) who were injured did not seek PEP despite the ART and PEP of HIV services being available in the two hospitals in the district.

Nurses/midwives and nursing assistants were respectively found to be 4.3 and 19.6 times respectively more likely to be injured by sharps compared to medical officers, and the commonest types of sharp related injuries (76.0%) were caused by needle stick and they occurred mainly when giving an injection (39.0%) followed by putting up an IV line (25.8%).

Basing on the findings, the study recommended:
Disseminate information regarding prevention of needle stick injuries and appropriate action following a high HIV risk needle stick injuries by HIV/AIDS specialists; and the emphasis should be in terms of risk management, teaching and continuing professional education.

The Ministry of Health through the office of the District Health Officer should build the capacity of health centre IIIs and IVs in the districts to offer post exposure prophylaxis of HIV in order to increase the up take of PEP by health workers after exposure to high HIV risk needle stick injuries.

The District Health Officer-Nakaseke should ensure that policies are in place on exposure control and PEP against HIV procedures are in all health units in the district to reduce the risk of occupational exposure to sharp injuries and increase up take of PEP against HIV.

Further research to assess the impact of HIV infection among health workers as result of injuries due to sharps is recommended.