

Antibiotic prophylaxis in caesarean section at Al-Helal Al-Emirati Hospital (Al-HEH), Gaza Strip, Palestine: A clinical audit

Alvacoubi, S; Bottcher, B; Elessi, K

Islamic University of Gaza, Gaza Strip, Occupied Palestinian Territory

Background Nowadays, there is a general consensus among the current best guidelines about the procedural aspects of antibiotic prophylaxis in Caesarean Section (CS). Clinical audit, which has never been done before in the Gaza strip, is a tool of quality control used worldwide for healthcare improvement and is aimed at assessing clinicians' and other clinical staffs' adherence to the applicable guidelines.

Objective This study was undertaken to audit the use of antibiotic prophylaxis in CS at Al-HEH, Gaza Strip, Palestine.

Methods A sample of 38 cases was selected randomly among all the women who underwent CS during the period from 22 March 2015 to 16 April 2015. Using SPSS program, data were analysed for age, type of CS, whether they received antibiotics or not, type of antibiotics, and timing of its administration.

Results Of the total 38 patients, urgent CS was carried out in 31.57% of cases while the procedure was elective in 68.42%. Antibiotic prophylaxis was given in 60.53% of cases before the surgery while no prophylaxis was received by the rest. Using Chi-Square Statistic, it was found that the correlation between the type of CS and the decision of prescribing antibiotics before the surgery to be statistically significant ($P = 0.02$). Moreover, 81.58% of cases were found to have received antibiotics after the surgery and a lack of uniformity of the antibiotics given to this group was also noted.

Conclusion This study indicates that clinicians at Al-HEH do not follow evidence-based practice regarding antibiotic prophylaxis when managing CS patients. Moreover, the non-justified use of antibiotics again in many of those who received antibiotics before and the lack of uniformity of the antibiotics given to this group represent an unaccepted clinical practice.

This audit, being the first to be done in the Gaza strip, highlights the effectiveness as well as the importance of clinical audit in identifying areas of weakness in our healthcare system. In view of this, a Clinical Practice Guideline for the use of antibiotic prophylaxis in CS was issued and implemented, to be followed up with a re-audit in 6 months.