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The Hidden Cost: Nosocomial Urinary Tract Infections as a contributor to Prolonged Hospitalization in a Rehabilitation Unit for Spinal Cord Injury Patients

Topic: Miscellaneous

Hamza Imami, Nabil Bentisse, Nisrine Mounsif, Ryme El Beloui, Hansaa Boutalja, Nada Kyal, Fatima Lmidmani, Abdellatif El Fatimi

Department of Physical Medicine and Rehabilitation, Centre Hospitalier Universitaire Ibn Rochd (CHU Ibn Rochd), Casablanca, Morocco

BACKGROUND

Many factors influence the length of stay (LOS) of spinal cord injury (SCI) patients in rehabilitation centers, thereby impacting rehabilitation outcomes and healthcare costs. Healthcare-associated infections, particularly nosocomial urinary tract infections (NUTIs), are among the most frequent complications during hospitalization. This study aims to assess the prevalence and causative pathogens of NUTIs, as well as their impact on the LOS of SCI patients admitted to the Physical Medicine and Rehabilitation (PMR) unit of Ibn Rochd University Hospital in Casablanca.

METHODS

A retrospective descriptive and analytical study was conducted on SCI patients admitted to the PMR unit of Ibn Rochd University Hospital in Casablanca. Patient demographics, hospital stay durations and infection status were collected from medical records. The microbial profile of NUTIs had been identified by urine culture. The average LOS was compared between infected and non-infected patients.

RESULTS

We collected data of 71 SCI patients previously hospitalized in our unit. They consisted of 31 women (43.66%) and 40 men (56.34%), the median age was 36,47.

The prevalence of NUTIs in our study was 50.7% (n = 36). Urine cultures identified the following pathogens:

Escherichia coli (n = 20)

Klebsiella pneumoniae (n = 7)

Pseudomonas aeruginosa (n = 4)

Providencia rettgeri (n = 2)

Raoultella terrigena (n = 1)

Entero-bacter cloacae (n = 1)

Proteus mirabilis (n = 1)

The median LOS of SCI patients was 84 days (ranging from 22 to 176 days). Patients with NUTIs had significantly longer LOS compared to non-NUTIs patients, with a median LOS of 97 vs 64.5 days (p = 0.04).

CONCLUSION

Our study found that NUTIs contribute to significantly prolonged LOS of SCI patients. *Escherichia coli* was the most frequently isolated pathogen. These findings highlight the need for preventive strategies and targeted infection control measures in order to reduce infection rates and alleviate associated healthcare burdens.

Statement of Disclosures

None

Corresponding Author:
Hamza Imami
Department of Physical Medicine and Rehabilitation, Centre Hospitalier Universitaire Ibn Rochd (CHU Ibn Rochd), Casablanca, Morocco
Email: imami.hamzaa@gmail.com

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