Preventing sharps injuries among nurses and midwives in Sub-Saharan Africa

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Objective.

- This study examined risks of sharps injuries among nurses and midwives providing care in Sub-Saharan Africa.
Methods.

• An anonymous questionnaire was completed by 712 nurses attending national or international meetings in Kenya, Nigeria, and Tanzania between 2008 and 2010.
• Sharps injuries, work schedule, and needle use were assessed.
• Generalized estimating equation models, accommodating the correlation within the residing country, were employed to examine the effects of work schedule and needle use on sharps injuries.
Results.

Nurses and midwives who:

• made home visits had higher odds of sharps injuries (adjusted OR [aOR]=1.52, \( P = 0.043 \)).

• were engaged in direct care ≥ 50% of time (aOR=2.31, \( P = 0.003 \) for 50-80%) and .

• were called in to work “off-hours” were more likely to sustain an injury (aOR=2.09, \( P = 0.006 \)).
Results (cont’d)

• The number of times a nurse used a needle was associated with higher odds of injuries (aOR=1.61, \( P=0.015 \)) as were starting IVs and recapping needles.
Conclusions

• Delivering care in patient’s home, more time spent in direct care, and increased needle use are risk factors for sharps injuries.

• Interventions aimed at reducing the risk of injuries, optimizing work processes in the home, reducing the number of times the nurse must handle needles, and use of safety engineered needles may reduce blood borne pathogen (BBP) exposure.