Racial Disparities in Hospital-Acquired Infection Rates

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Cara Alcorn’s study focused on whether patient race is associated with rates of hospital-acquired infection (HAI) within hospitals, controlling for treatment differences and other patient traits. Hospital-acquired infections, according to the World Health Organization, are those “infections acquired during hospital care which are not present or incubating at admission.” Alcorn’s research noted that HAI are a “preventable threat to patient safety,” increasing “lengths of stay, complication rates, and overall morbidity and mortality.”

Alcorn focused on three types of HAIs: Clostridium Difficile Infection, Catheter Associated Urinary Tract Infections (CAUTI), and Central Line Associated Bloodstream Infections. She analyzed HAIs using hospital discharge data for adults age 65 and over who were treated in Virginia’s hospitals between 2012 and 2015 for a heart attack, heart failure, pneumonia or who had undergone major surgeries including those that were cancer-related. Using a weighted least squares regression model, Alcorn found that HAIs occur rarely in Virginia’s hospitals, and that “there does not seem to be a harmful racial disparity in the occurrence of HAIs within Virginia acute care hospitals.” In addition, she found that “African American patients had significantly lower rates of CAUTI than white patients treated at the same hospital for the same conditions.”