

How Many Resources Are Wasted in the Treatment of Nosocomial Infections and How Much Could We Save If They Were Completely Controlled?

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Nosocomial infections are a widespread problem around the world. The Center for Disease Control (CDC) estimates that nosocomial infections affect around 1.7 million patients per year, and cause 99,000 deaths. According to CDC, 32% of all healthcare acquired infections are urinary tract infections, 22% are surgical site infections, 15% are pneumonia and 14% are bloodstream infections. Nowadays, only 1/3 of nosocomial infections can be prevented with the Infection Control Programs. The other 2/3 cannot be prevented with the programs used nowadays. In USA, 31 billions of dollars are spend in the treatment of nosocomial infections per year. Purpose: The purpose of this study is to demonstrate how this 2/3 of nosocomial infections could be controlled with the use ancient medicines reasoning, such as traditional Chinese medicine and Hippocrates theories. Another goal is to make evident the possible economy to healthcare when using these techniques and tools in the treatment of nosocomial infections. Methods: The methodology used was a review of studies, such as those presented by Hippocrates ("Natural forces within us are the true healers of disease."), as well as others from oriental medicines, which comprehend the disease as originated from three factors: external (exposure to cold, heat, humidity, wind and dryness), internal (emotional) and dietary. Findings: When comprehending the patient in a broader view, considering the energy imbalances of Yin, Yang, Qi, Blood and Heat retention, it is possible to control and prevent better more nosocomial infections, reducing the costs for the healthcares. Conclusion: The 2/3 of not controlled nosocomial infections cannot be prevented because of the reasoning used in the treatment of infections in Western medicine. When using ancient oriental medicines reasoning, a different thinking can be used. According to Einstein, "We cannot solve our problems with the same thinking we used when we created them."

Introduction

Nowadays, the programs of infection control can address only one third of nosocomial infections. Therefore, two thirds of these infections are still not controlled, and their cause remain unknown. Hospital or nosocomial infections are defined as a type of infection that occurs within 48 hours of hospital admission, after 3 days of discharge from the hospital or 30 days after an operation. Infections manifested during one year after prosthesis-placement surgery are also considered nosocomial infections. Studies point out that 1 in each 10 patients will acquire a nosocomial infection, which can result in 5,000 deaths in the United States per year.

The Center of Disease and Control released a study entitled The Direct medical costs of healthcare-associated infections in U.S. hospitals and the benefits of prevention, in which it is stated that nosocomial Infections costed yearly 28.45 billion of dollars per year.

In 2005, The Study of the Efficacy of Nosocomial Infection Control (SENIC) demonstrated that a third of nosocomial infections might be prevented with appropriate infection control measures.

Purpose

The purpose of this study is to demonstrate, through the metaphor of the tree, that Western medicine considers the nosocomial infections on the leaf-level, while ancient medical tools such as traditional Chinese medicine, considers the disease on the root-level, not addressed in Western medicine, such as external pathogenic factors, related to the appearance of infectious diseases in TCM.

Methods

The methodology used was a review of studies and a study developed by the author with 409 patients from her clinic in Brazil, shown that patients with the same diagnosis many times have different imbalances on the energy level, leading to a different outcome when being treated with the same method or same medication. According to Hippocrates "It is more important to know what sort of person has a disease than to know what sort of disease a person has", in Western medicine, the focus is on the disease, not in the patient.

Results

When comprehending the patient in a broader view, on the root-level and the external pathogenic factors of the metaphor of the tree, considering the energy imbalances of Yin, Yang, Qi, Blood and Heat retention and invasion of external pathogenic factors, it is possible to control and prevent better more nosocomial infections, reducing the healthcare's costs.

Discussion

According to the study entitled Climate, Environment and Epidemic Febrile Diseases: A View from Chinese Medicine, written by Dominique Buchillet, the treatment of infectious diseases in Western medicine is focused on the pathogen (fungus, bacteria, virus), and this can diminish the effectiveness of the treatment, while the treatment in traditional Chinese medicine is focused on rebalancing the internal energies of the patients, fortifying immunity to cause natural improvement. The treatment with antibiotics or other high-concentrated medication, when applied to a patient which already entered the hospital with energy imbalances, may worsen the energy imbalances status, leading to formation of more internal Heat, responsible for the symptoms of infection (hyperemia, yellow color of the secretion, microhematuria, itching, abdominal pain, bleeding gums, bad breath).

When treating the patient without considering the energy imbalances, the outcome of the same treatment may vary, and the treatment can cause further energy imbalances at the root-level, not visible by the naked eye, worsening the energy imbalances that the patient could have before being hospitalized. Many times, the symptoms of nosocomial infections are related to the imbalance of energy that leads to the formation of internal Heat. The treatment commonly done in the majority of hospital worldwide, using high-concentrated medications (antibiotics) may harm the Qi and Yin energy of the patient, leading to no improvement of the infection symptoms, not only due to the bacterial resistance, but due to the energy deficiency of the patient, generating more formation of internal Heat, the cause of signs and symptoms of infection.

According to Arndt-Schultz law, the use of high-concentrated medication, leads to worsening of internal energy, harming vital energy, what may be related to the increase on the number of nosocomial infections, as demonstrated in previous articles of the author, such as the study entitled Can Hospital Osteomyelitis Be Treated Without the Use of Antibiotics?, published by the Microbiology and Infectious Diseases Journal in 2018, in which the author presents two patients with nosocomial osteomyelitis after knee surgery, and were using antibiotics for two years without improvement of the infection, and the author was only able to treat the infection when all the high-concentrated medication were withdrawn. The medications in itself was harming the energy of the patients, leading to nosocomial osteomyelitis symptoms. Both patients were diagnosed with multi-resistant bacteria, but when the energy of the patients were improved and were rebalanced, the bacteria was not able to survive, and the cure of this pathology was achieved without the use of antibiotics.

A second study of the author approaching nosocomial infection, is the

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study entitled 'Could Postsurgical Nosocomial Cellulitis be Treated without the Use of Antibiotics?' published by the *Acta Scientific Microbiology*, in 2018. In this study, the patient had an infection post correction of a tibia fracture and elbow after a motorcycle accident.

The patient started presenting symptoms of hyperemia, edema and pain on the local of the incision, around five days after starting the use of antibiotic (prophylactically) and anti-inflammatory medication (to diminish the pain). Despite the use of many kinds of antibiotics to treat this nosocomial infection, three months later, the patient had no improvement of his infection, with worsening of the symptoms. Through the reasoning of traditional Chinese medicine, the author withdrawn all the medication and recommended Chinese dietary counseling, to rebalance the energy of the patients and avoid the formation of more internal Heat. A few acupuncture sessions with apex ear bloodletting was recommended to take out internal Heat. Rebalancing the internal energy of the patient, it was possible to cure the patient, without the necessity of antibiotics use.

A third study of the author entitled 'Is it Possible to Treat Community-Acquired and Nosocomial Infections with the Same Method, Without the Use of Antibiotics?' in which the author demonstrates that community and nosocomial infections many times are caused by the energy imbalances, and could be related to external pathogenic factors influence, not addressed in Western medicine nowadays. Reorienting the diet according to their energy imbalances, rebalancing the internal energies and taking out Heat retention, the patients presented improvement of the symptoms of both community and nosocomial infections without the necessity of using antibiotics.

The formation of infection and disease have been related to external pathogenic factors in TCM, as addressed by another study of the author, entitled 'Invasion of Wind and Cold as Cause of Respiratory Tract Infection Outbreak in a School Kinder Garden Group of Kids', which analyzed an flu outbreak in a kinder garden, affecting around 50% of children in a classroom, and vaccination of all the students were recommended, but was controlled turning off the fan that was on the ceiling of the classroom, without the necessity of vaccination.

Conclusion

The conclusion of this study is that, for having complete nosocomial infection control, it is important for the physician to have a broader view, including and understanding the energy imbalances, at the root level (emotional, diet,

external pathogenic factors) and not just only looking at the symptoms, that is not comprehended by Western medicine. This is why training of the professions in this field is important for better comprehension and treatment of this kind of disease, saving money on the treatment and control of these infections.

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