



Editorial

AT THE AYURVEDA HOSPITAL, PRACTICES FOR CONTROLLING AND PREVENTING INFECTION MUST BE DISSEMINATED

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In order to achieve health and alleviate illness, Ayurveda, an ancient science of life, takes a holistic approach. The fundamental idea of health that guides modern medicine is present in Ayurveda. A major component of its conception is the preservation of a healthy person's health [1]. *Sankraman* (infection) is a concept that has been well-studied, as has the control and prevention of it. Ancient science overemphasizes the need of personal hygiene, seasonal maintenance, and environmental preservation for good health, the control of sickness, and the prevention of its spread. Due to government support and growing public awareness, Ayurvedic medicine is now becoming more and more popular.


In the field of medicine, "hospital infection" is currently used broadly. The most important factor at a health care facility is "patient safety" or the "concept of no harm to patients" [2]. The term infection means invasion and multiplication of micro-organisms in the body.

The causative infectious agents are bacteria, viruses, fungus, Yeast, micro-organisms, etc[3]. The route of infection may be direct contact, airborne, mechanical transmission, nosocomial etcetera. In general, the infection is achieved and spreads in hospitals during consultation, diagnosis, treatment, and procedure. Nowadays the Hospital-acquired infections (HAI), surgical site infections (SSI), device-related infections, and blood-borne infections are included in guidelines for infection prevention control and monitoring [4].

The primary aim of health care facilities is to prevent infection and control the spread of infections. The standard practices for infection prevention and control (IPC)[5] include hand hygiene, use of personal protective equipment (PPE, like a face mask, gloves, shoe cover, head cap, gown, etc.), avoiding unnecessary touch, linen management, waste management (general, biomedical, hazardous), respiratory hygiene, cough etiquettes, spill management, surrounding environment care, care of medical instruments or equipment's, hospital infrastructure, staff vaccination.

The question rises why need to be aware of infection prevention and control (IPC)? The well-known slogan "prevention is better than cure" is sufficient to display the subject's importance. The IPC practices either prevent the infection or reduce the healthcare-associated infections. It may save lives, improve quality of life, and decreases the financial burden on patients, and hospitals ultimately on the country. It's the duty of hospitals to stop HAI and safe places for patients. The good practice of IPC is obligatory at all health care centers or hospitals either allopathic or Ayush centers [6]. The Ayush or Ayurvedic centers also attended to the alike persons among the society, the diseased persons, and their body fluids like urine, feces, saliva, blood, sputum, skin touch, etc. Outdoor care, indoor care, pharmacy services, surgical procedure, *Panchakarma* procedures, and bloodletting procedures practices are frequent practices at most Ayurvedic health care centers. Their acquirement and subject of concern are the same as patient care principles are similar for all, irrespective of management modalities implemented.

At Ayurveda centers, it was noticed that generally, staff shows little interest and less initiative towards compliance with HIC guidelines, thinking that it is Ayurveda health centers. The wrong perception among the Ayurveda fraternity is also that infection is mostly seen to be spread from big crowded allopathic hospitals, that's not true. The basic practical

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differences realized among staff are that showing lesser alertness and lesser enthusiasm. Each staff has a duty of good HIC practices either working at Ayurveda or in other hospitals. All have equal responsibility for human care. Bilateral acceptability is expected from staff and the hospital admin site. Both must adhere to guidelines for full compliance. The materials for IPC must be available as per consumption and maintain the reserve stock. The gap should be identified at the level of material staff implementation and admin. Awareness and sensitization are routine tasks for compliance. This act requires teamwork and hand of help for their fruitful contribution [7]. Among staff, the variation is seen in infection prevention practices and competencies. The evaluation and outcomes also vary.

Now the matter of concern is how to achieve compliance. Compliance is possible by adhering to IPC guidelines issued by ICMR [8] CPCB [9], identifying the gap area, regular monitoring of events, and timely corrective action. The sensitization and awareness through regular training of the staff is the key factor to improve the skill of IPC. The use of suitable personal protective equipment, hand hygiene practices, a moment of hand wash, spill management, equipment care, instrument care, surrounding care, etc. [10] is a pillar of IPC. One should aware of the aspect of infection, its features, and its dreadful effect. The ultimate goal is to reduce risk and prevent infections. Documentation and record-keeping are mandatory [11]. The implementation and practices of infection prevention policies should be mandatory along with improvement of competencies, their assessment and feedback on performance should be carried out regularly. This will improve the quality of Ayurveda Hospitals.

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