



DIRECT COSTS OF PRESSURE INJURY DRESSINGS IN INTENSIVE CARE PATIENTS

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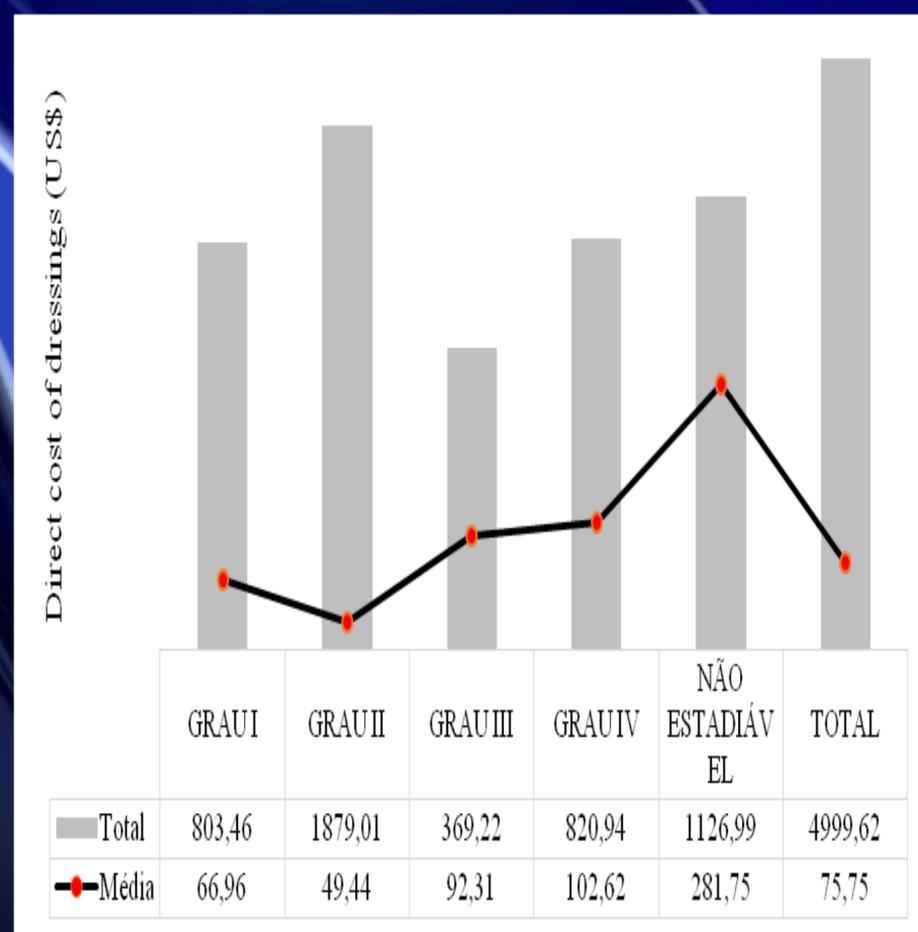
Introduction: Intensive Care Unit are specialized hospital spaces dedicated to the care of critically ill patients at high risk of organ failure and death. Served by a multidisciplinary team, patients under intensive care require constant monitoring and different modalities of physiological support to their organic systems during the hospitalization period. Pressure injuries are considered one of the most important and frequent complications during hospitalization, especially in spaces such as an intensive care unit. National studies with specific samples highlight that expenditure on pressure wound dressings may vary depending on the degree of the lesion, materials and solutions used, and professional training.

Objective: To analyze the direct costs of pressure injury dressings in intensive care patients at a hospital in the Campos Gerais region, Paraná.

Methods: An observational, retrospective and analytical study, developed with 48 medical records of patients admitted from August 2018 to August 2019 in an Intensive Care Unit in Ponta Grossa, Paraná. For data collection, we used our own instrument, subdivided into three parts: variables related to the patient, pressure injuries and the inputs used in dressings. Data analysis was performed using descriptive statistics. All ethical and legal precepts have been met.

Results: During the period investigated, 66 pressure injuries were identified, distributed in seven body regions, with predominance of stage II. Overall, the total direct cost of dressings was \$ 4.999,62 while the average direct cost was \$ 75,75 per injury, regardless of staging.

Figure 1 – The direct costs complete and medium (materials and solutions) of pressure injury dressings, according to staging degree. Ponta Grossa, Paraná, Brasil, 2019.



*Conversion rate: US\$ 0,23/R\$, based on quote of the day 27/11/2019, provided by the bank of Brazil.
Fonte: As autoras (2019)

Conclusion: The direct dressing costs of the identified pressure injuries were considered low compared to other national and international investigations. The highest total and average direct costs, respectively, were identified in stage II LP and unstageable LP. There was a greater and smaller variety of materials and / or solutions in stages I and III, respectively, but there was no record of costs of minimum inputs used in different stages of LP.