

# JALITY IN THE PRESCRIPTION OF ANTIFUNGAL IN A HOSPITAL WITH AN ANTIMICROBIAL STEWARDSHIP PROGRAM



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## BACKGROUND AND IMPORTANCE

Nowadays, there are various antifungal treatments on the market, highlighting the need for restrictions on their use.

## AIM AND OBJECTIVES

Evaluate the prescription quality and clinical progress of the patient with antifungal treatment in a hospital with an educational antimicrobial stewardship program (ASP).

### MATERIAL AND METHODS

Retrospective observational study (Janual December 2023)
Patients who required treatment with

controlled antifungals

282

Software used: Orion Clinic® and FarmisOncofarm®.



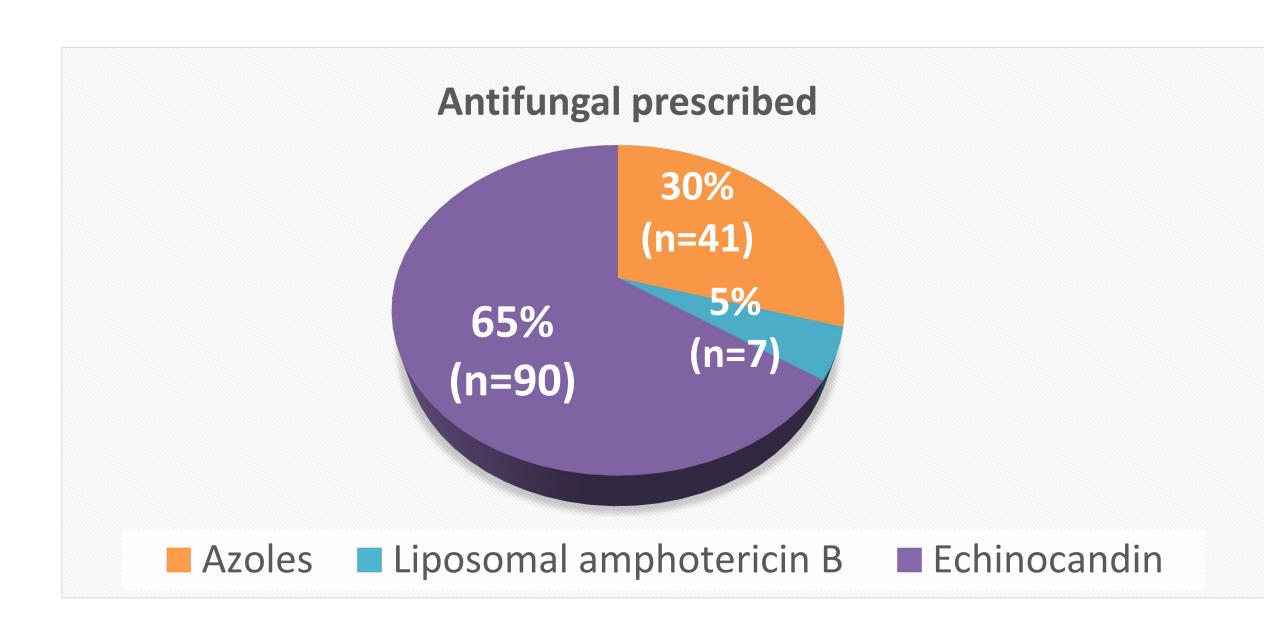
Variables collected: sociodemographic and treatment variables

Prescription quality	Clinical progress
Empirical vs directed antimicrobial therapy	
Indication adequacy according to the ASP criteria	30-day hospital re- admission and mortality
Doctor's approval of the	
recommendation made by the ASP	

## 

N=138 patients
N=87 men (63%)
Mean age: 66 years

Median of days treatment: 4 (RIC:8) Median of days hospital stay: 20 (RIC:24)



64% of prescription was made by critical intensive care

## RESULTS

#### PRESCRIPTION QUALITY

- ☐ Treatments → 110 empirical vs 28 directed
- $\rightarrow$  69(50%) were considered appropriate by ASP, being 52 empirical therapies and 17 directed therapies.
- □ A treatment modification recommendation was suggested in 69(50%) patients, being accepted in 41(60%) patients by the doctor.

#### **CLINICAL PROGRESS**

- □ 70(49.2%) patients were discharged without new readmissions or infection complications
- □ 19(13.7%) were re-admitted 30 days after de discharge
- ☐ 49(35.5%) died (39/49 critical patients)

#### CONCLUSIONS

## **Prescription quality**

- The majority of treatments were empirical (echinocandins the most commonly group).
- **ASP** deemed half of the prescriptions to be appropriate.
- Over half of the cases implemented the recommendations suggested by ASP.

## Clinical progress

- Fifty percent of the patients had no complications following discharge.
- The intervention of these programs is important to ensure a favorable clinical evolution in more complex patients.

