



EVALUATION OF EARLY ORAL SWITCH IN ANTIMICROBIAL THERAPY INTERVENTIONS THROUGH THE WASPSS® PROGRAM IN THE WORK OF PROA TEAMS.

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BACKGROUND AND IMPORTANCE

The WASPSS® (Wise Antimicrobial Stewardship Program Support System) application, implemented under the National Plan Against Antibiotic Resistance (PRAN), facilitates antimicrobial treatment (AT) management within Antimicrobial Stewardship Programs (PROA). Alerts generated by the tool help optimize AT, focusing on intravenous (IV) therapies lasting >3 days with good oral bioavailability.

AIM AND OBJECTIVES

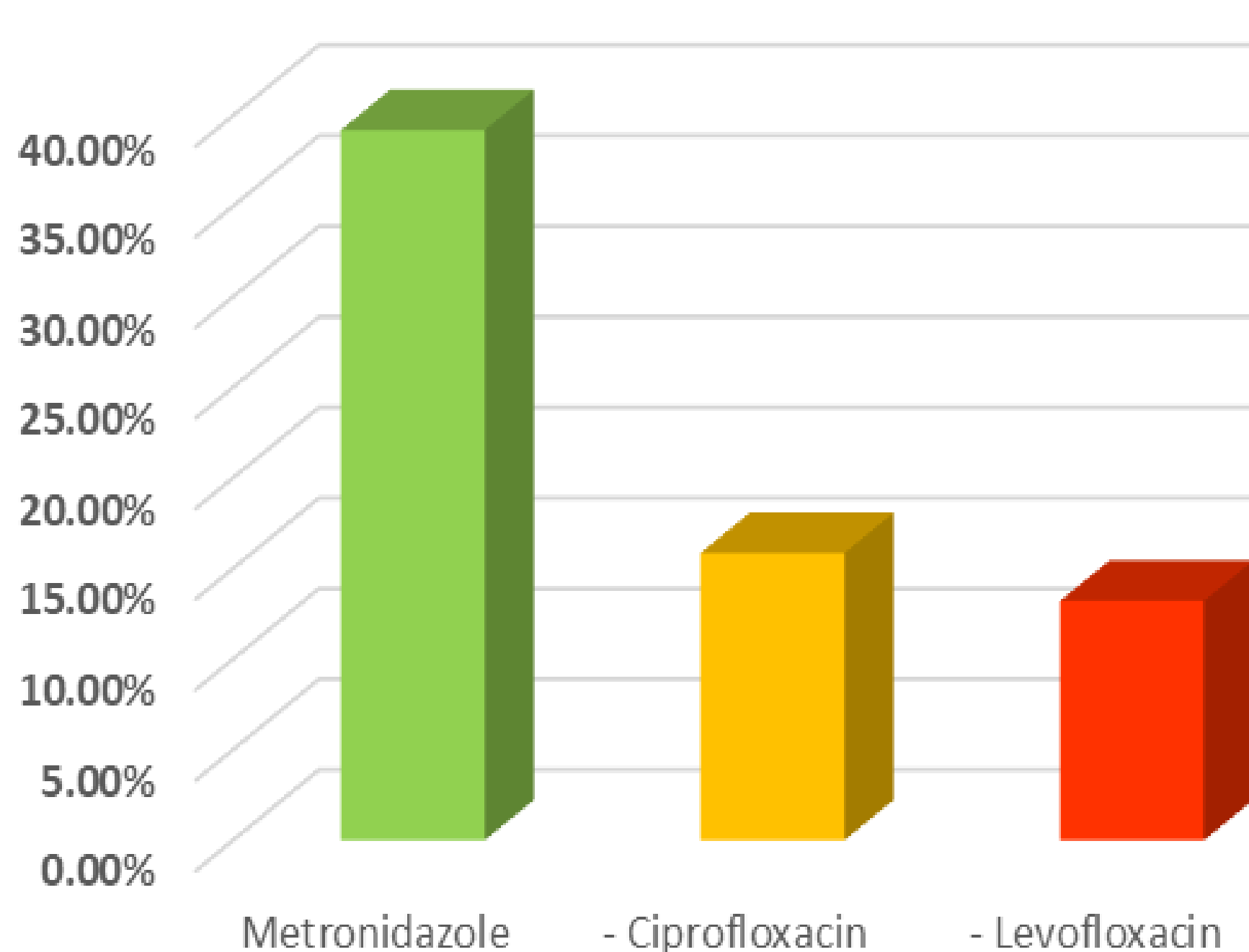
Analyze outcomes of IV AT alerts (>3 days, good oral bioavailability) generated by WASPSS® within the PROA framework.

MATERIALS AND METHODS

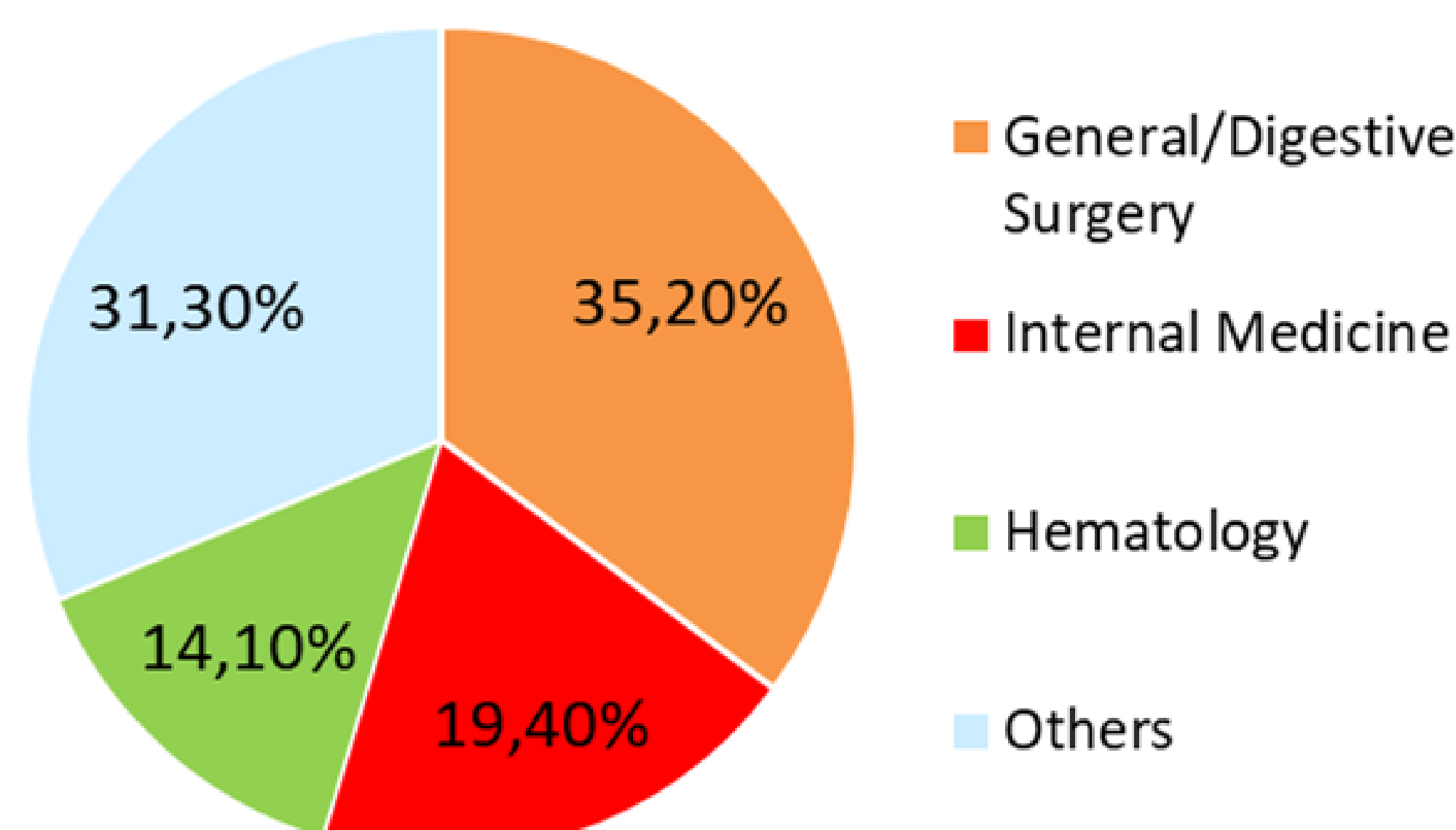
- Study Period: Oct 1, 2022 – Oct 1, 2024
- Alerts Analyzed: 2252 (227 focused on IV AT >3 days with Early Oral Switch [EOS] potential).
- Data Collected: Clinical service, treatment, response, action taken, and responder identity (patient identifiers excluded).

RESULTS

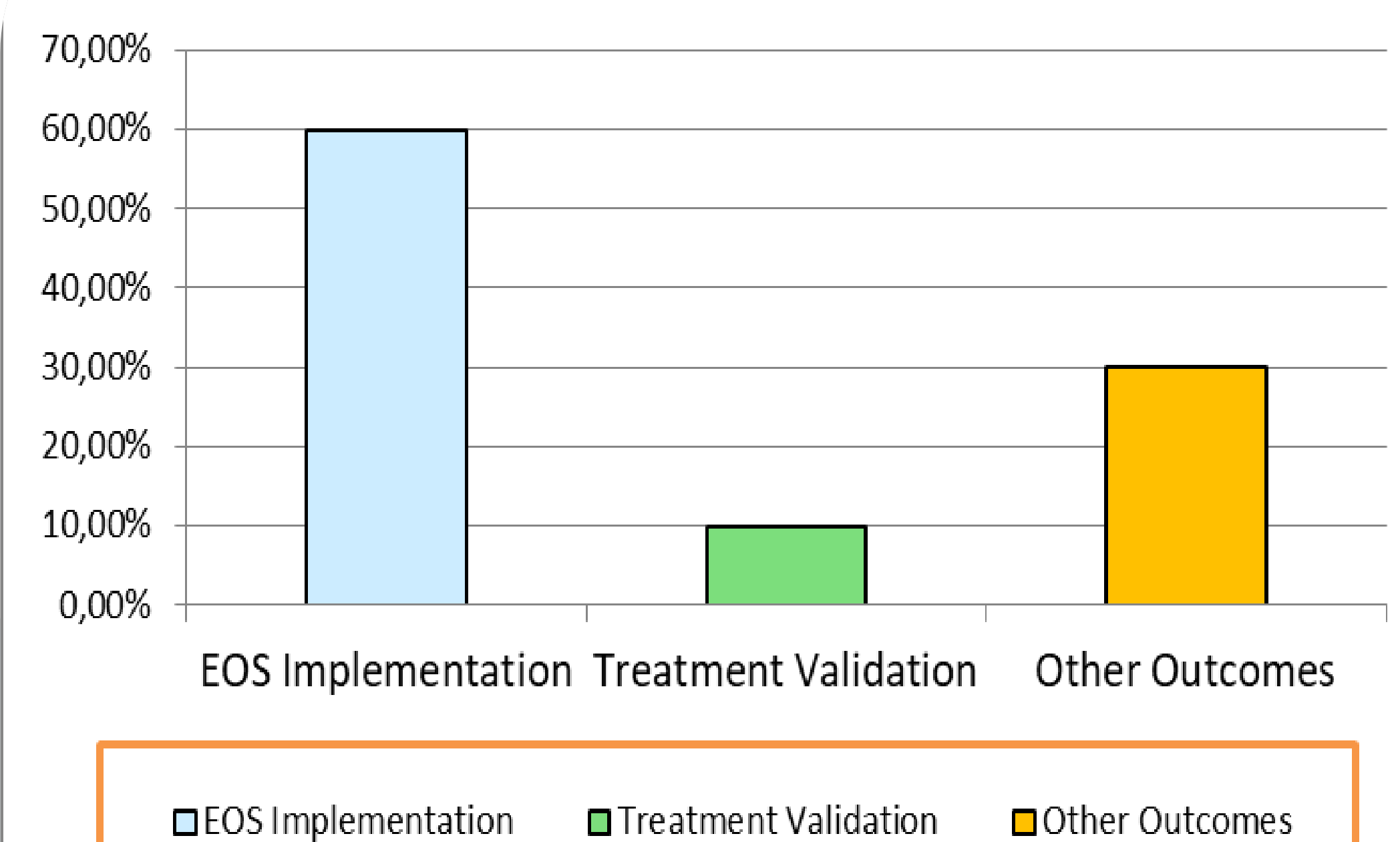
Most frequent antibiotics



Distribution of Alerts by Clinical Service



Recommendations outcomes



CONCLUSION AND RELEVANCE

- 10% of alerts identified IV AT suitable for oral conversion, with 60% resulting in EOS implementation.
- General/Digestive Surgery was the most involved service, with metronidazole as the primary antibiotic.
- WASPSS® has improved EOS rates but requires ongoing optimization to enhance precision in EOS management.