MEROPENEM DE-ESCALATION: AN APPROACH AGAINST BACTERIAL RESISTANCE

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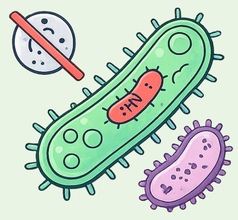
BACKGROUND & IMPORTANCE

- **Antibiotics resistance** is a global health threat, driven by overuse and misuse of antimicrobials.
- **WHO's AWaRe** classification guides responsable antibiotics use.
- **Carbapenems** fall into the Watch group, indicated for specific , severe infections to preserve their efficacy.
- **De-escalation to narrower-spectrum agents** upon clinical stability and microbiological identification is crucial to mitigate resistance.



AIM & OBJECTIVES

The **primary aim** is to **evaluate the degree of meropenem de-escalation** in a **second-level hospital** where **61 carbapenemase-producing bacterias** were identified in 2024.

METHODS

- **Descriptive, observational, restrospective study** conducted during the last trimester of 2024
- **Inclusion**: Adult patients (> 18 years) treated with meropenem for at least 48 hours with available microbiological data.

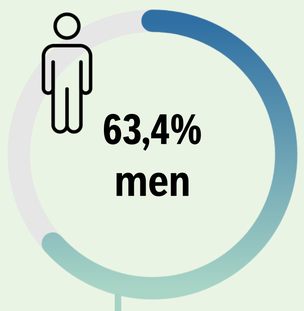
192 patients reviewed

Median age: 72 years

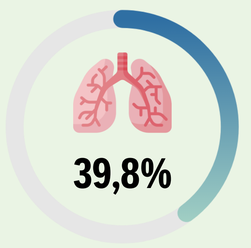
End: 92 patients included

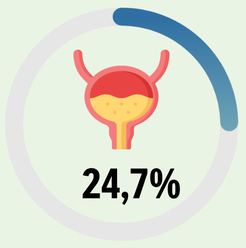
Exclude: Incomplete date, early death, transfer

RESULTS

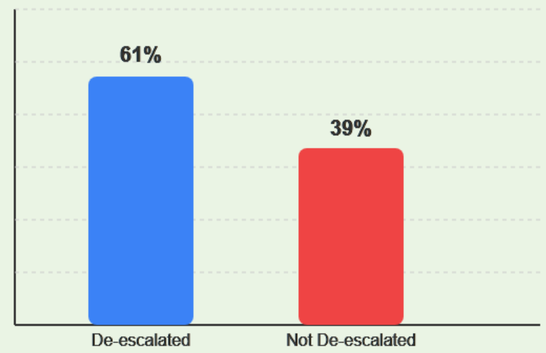


Infections

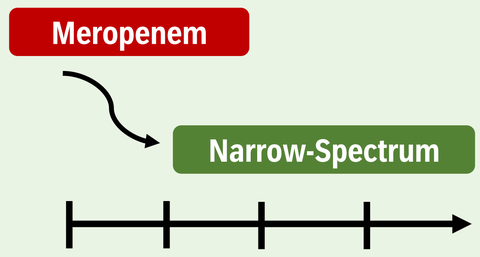




Only 61%
of elegible patients had antibiotic de-escalation.



39%
Completed treatment with meropenem unnecessarily.



CONCLUSION

Antibiotic de-escalation was not performed correctly in a significant proportion of patients.

This reflects non-compliance with WHO AWaRe guidelines and highlights the urgent need for improved antimicrobial interventions to combat bacterial resistence.

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