USE AND EFFECTIVENESS OF TIGECYCLINE IN A PRIVATE CARE HOSPITAL

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OBJECTIVES

Evaluation of usefulness, efectiveness and safety of tigecycline after observing an increase in use in the emergency department.

METHODS

Observational and retrospective study carried out in a 300 bed private care hospital. Patients who started tigecycline between February 2013 and February 2017 were selected. Data on usefulness were collected: duration, source of infection, severity, treatment (empirical or directed), adaptation according to local treatment guidelines, isolated microorganisms and resistance profile. Effectiveness was analyzed through the clinical and microbiological response. Safety was assessed with the appearance of side effects during treatment.

RESULTS

Fourty one patients (70% male) were collected. The mean age was 64 years old (standard deviation (SD):13.9). The mean duration of treatment was 12 days (SD:17). In 26 (64%) patients the treatment was directed and in 11 (26%) it was empirical. In 4 (10%) patients the treatment was considered inadequate. Sixteen patients (39%) required intensive care unit (ICU).

Main foci of infection

Main isolated pathogens

50





Regarding the effectiveness, 25 (61%) clinical responses, 6 (15%) microbiological responses with predischarge culture and 27 (66%) without microbiological results. Side effects were observed in 8 (20%) patients and were mostly abdominal (nausea, epigastralgia) and urticarial. A single patient had to finish treatment for severe rash.

DISCUSSION

Tigecycline is an antibiotic used for intra-abdominal infections and in a high percentage in critically patients. Most of the treatments were directed especially for enterobacteria and Enterorocus sp. The clinical response was observed in the main of the patients, whereas the microbiological response was detected in few patients because of the absence of culture at the end of the treatment. The toxicity of the drug was mostly dermal and abdominal, and it was usually well tolerated.

CONCLUSIONS

Pharmacy department and microbiology department established an antibiotics uses guideline in emergency room. Tigecycline was restricted to internal medicine in hospitalized patients and ICU patients.

