

ANTIMICROBIAL STEWARSHIP PROGRAM INTERVENTIONS IN A THIRD LEVEL HOSPITAL: A ONE-YEAR REVIEW

¹Pérez-Almagro MF, ¹Aretio Pousa A, ¹Periáñez Párraga L, ²Vilchez Rueda HH, ³Rojo Molinero E, ²Martín Peña ML, ³Mulet Aguilo X, ¹Delgado Sánchez O.

¹Pharmacy Department ² Department of Infectious Diseases, ³Department of Microbiology.
 University Hospital Son Espases, Palma de Mallorca, Illes Balears, Spain

1. AIM AND OBJECTIVES

To assess the appropriateness of broad-spectrum antimicrobial prescriptions and the acceptance of interventions made to optimize the antimicrobial management during one year.

2. BACKGROUND AND IMPORTANCE

Antimicrobial stewardship program (ASP) consists of a multidisciplinary group involving infectious diseases physicians, microbiologists and pharmacists. ASP improve clinical outcomes and patient safety, and help combat antibiotic resistance. In our hospital, ASP includes daily review of broad-spectrum antimicrobial prescriptions in order to optimize the management among hospitalized patients.

3. MATERIALS AND METHODS

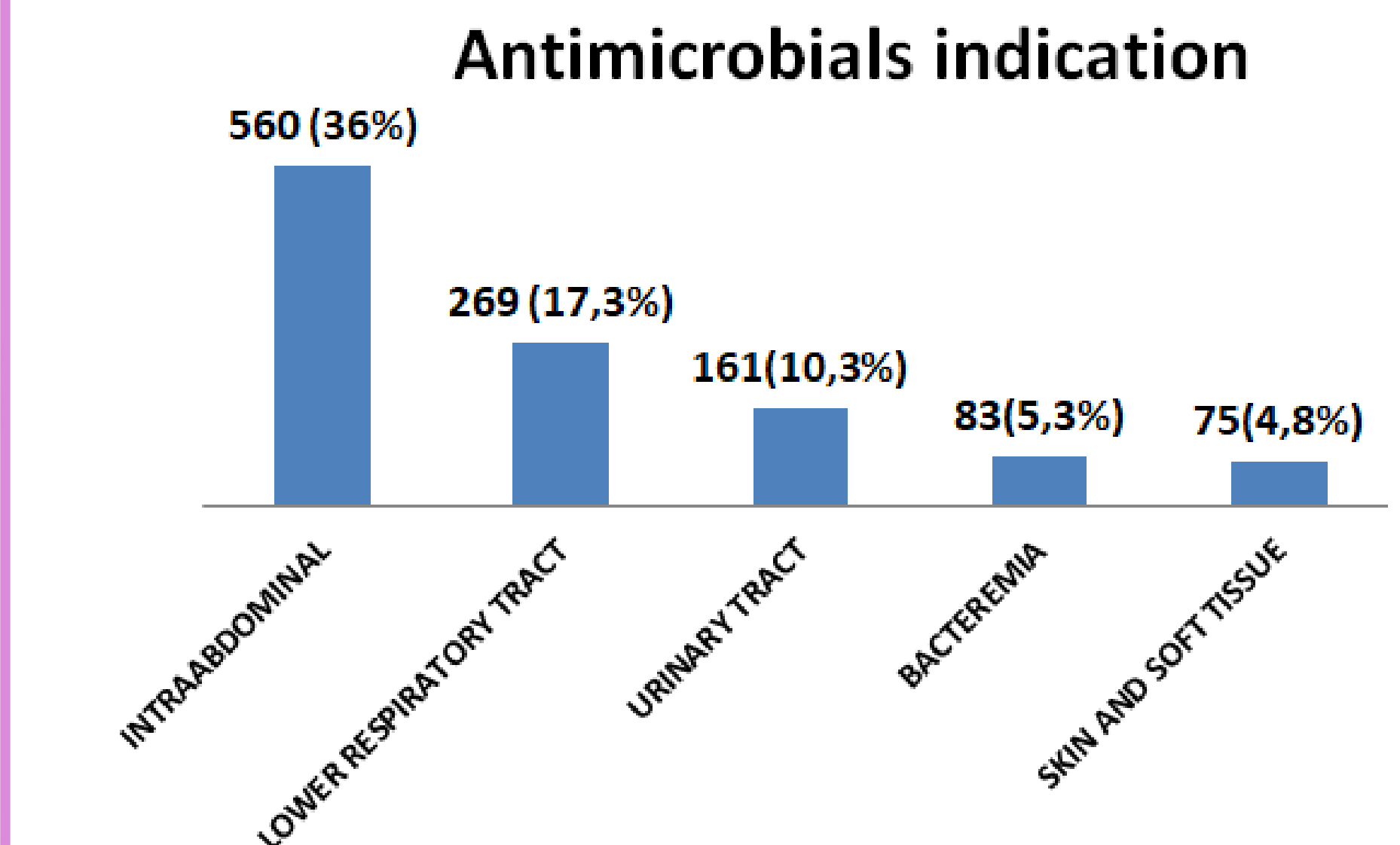
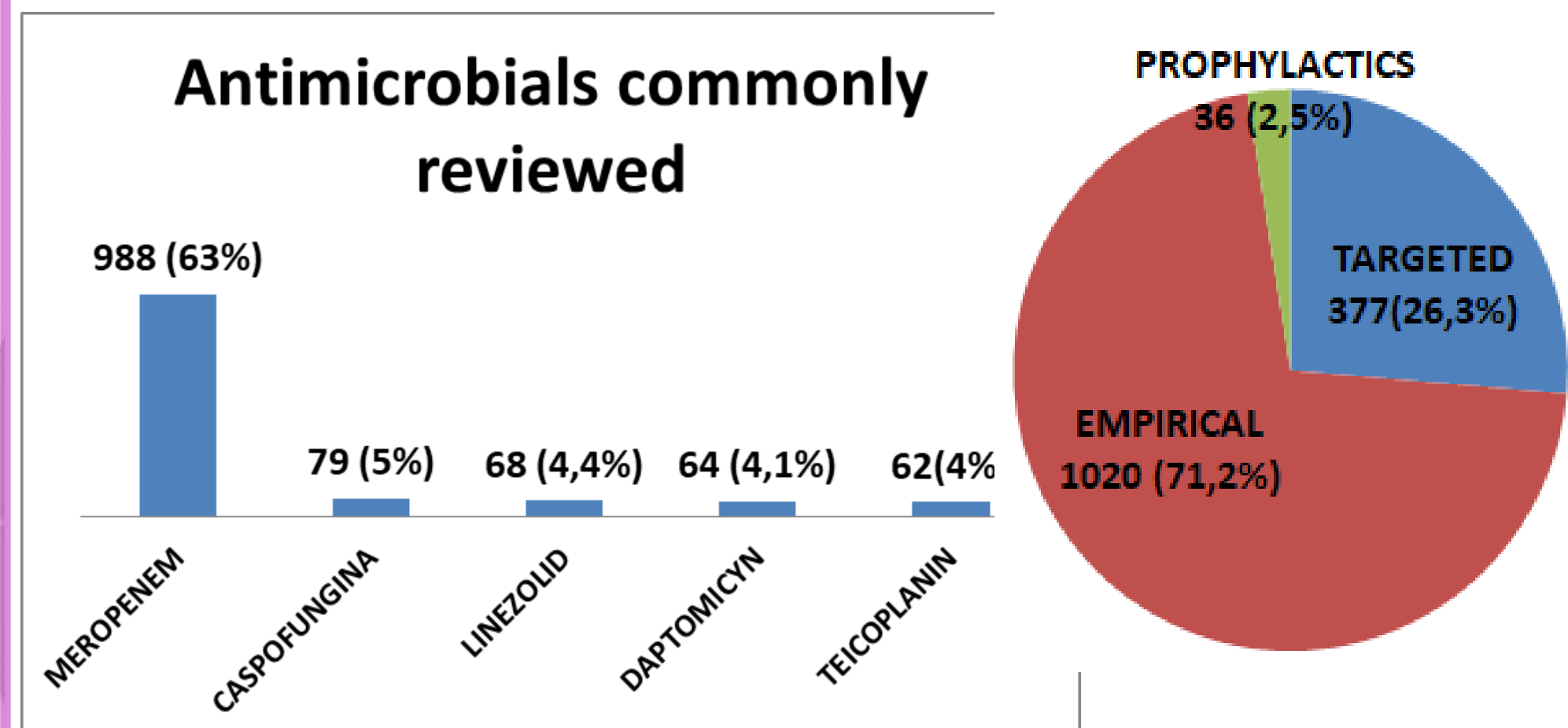
Observational study of interventions made as a part of the ASP from may 2021 to may 2022. Antifungal and broad-spectrum antibiotics prescribed for 2 days were analyzed (attending specially to meropenem, ceftazidime-avibactam and ceftolozane-tazobactam). We examined the indication of the AP, if it was an empirical, prophylactic or targeted treatment and the appropriateness. Then we made a recommendation according to dosage optimization, duration of treatment, antibiotic de-escalation and escalation, and necessity for supplementary tests. Finally, interventions acceptance was checked.

5. CONCLUSION

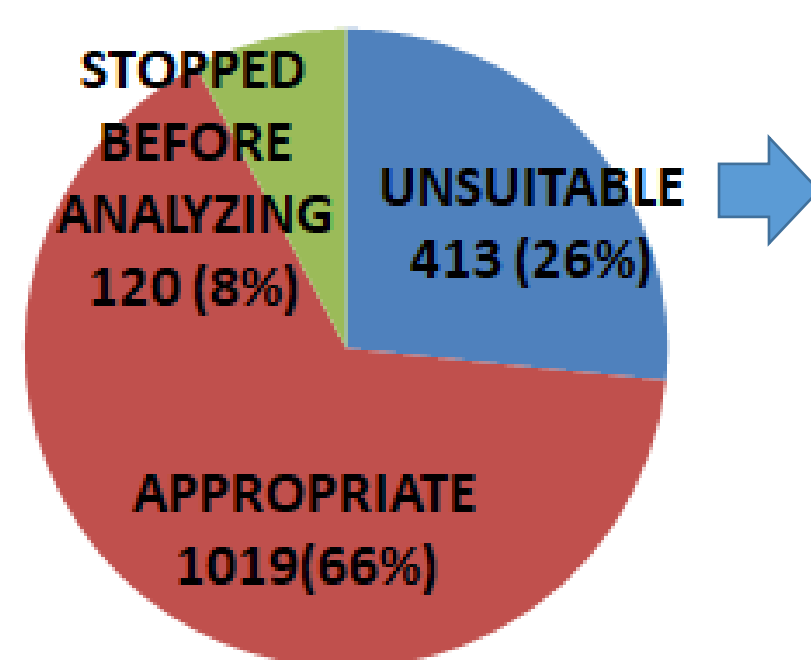
A quarter of AP were inappropriate. The majority of interventions made by an ASP were accepted. ASP should be implemented in hospitals in order to optimized the AP and to promote rational prescription of broad-spectrum antimicrobials.

4. RESULTS

We analyzed 1552 AP.



APPROPRIATENESS



De-escalate	53%
Suspend	25,4%
Optimize dosing	9,2%
Request supplementary tests	4,3%
Change antibiotic	2,4%

Regarding acceptance, 300 (72,6%) interventions were accepted.

6. CONTACT

Manuel Francisco Pérez Almagro
 Son Espases Hospital
 manuelfrancisco.perez@ssib.es

