

INFLUENCE OF ANTIBIOTIC STEWARDSHIP PROGRAMME INTERVENTIONS IN A HOSPITAL AT HOME UNIT

Lázaro Cebas A.¹, Tejedor Prado P.¹, Izquierdo García E.¹, Such Díaz A.¹, Cañamares Orbis I.¹, Garrido Dorronsoro J.², Fraile González J.L.³, Cano Alcalde L.³, Palencia Herrejón E.², Sánchez Artola B.², Escobar Rodríguez I.¹

¹Pharmacy Service. ²Stewardship programme members. ³Hospital at home unit.

Infanta Leonor University Hospital, Madrid, Spain

Background and importance

Hospital at Home (HaH) units

- •Save costs; reducing hospital stay and complications as nosocomial infections.
- •Antibiotic stewardship programs (ASP) might be extended from conventional hospitalization.

Antibiotic stewardship programs (ASP) interventions in HaH unit at the beginning of 2019

- •To prescribe **fluoroquinolones only** to patients with **no safer alternatives.**
- •To reduce the prescribed **dose of cefixime** from 400 mg/12h to **400** mg/24h.
- To analyse the influence of the ASP interventions in a HaH unit.

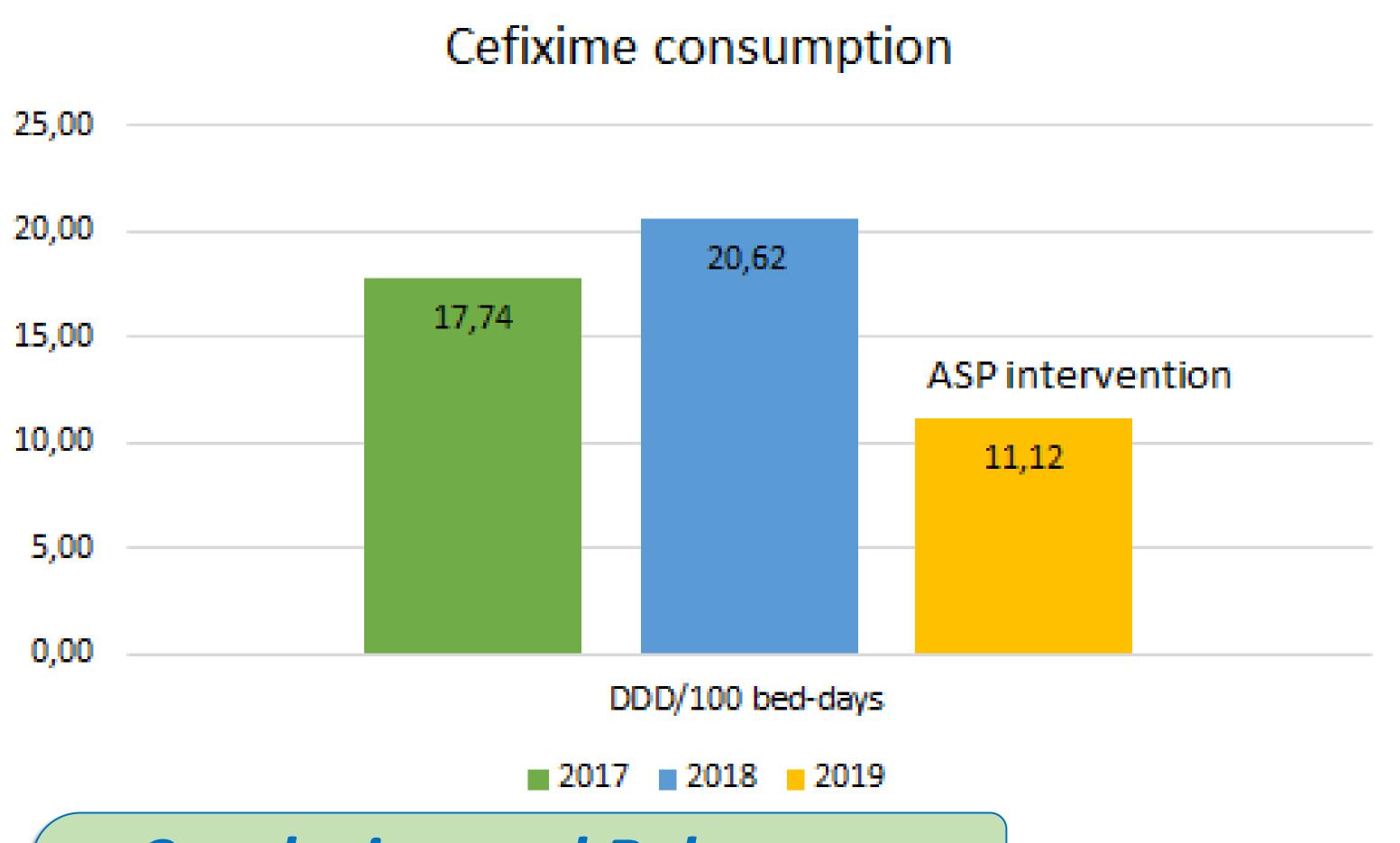
EWF thunks the continued support of Plateaus Partner: Amogen, Gold Patrier: Bayer, Silvin Fasteur: Clinique, and Corporate Patrier: Consolarit.

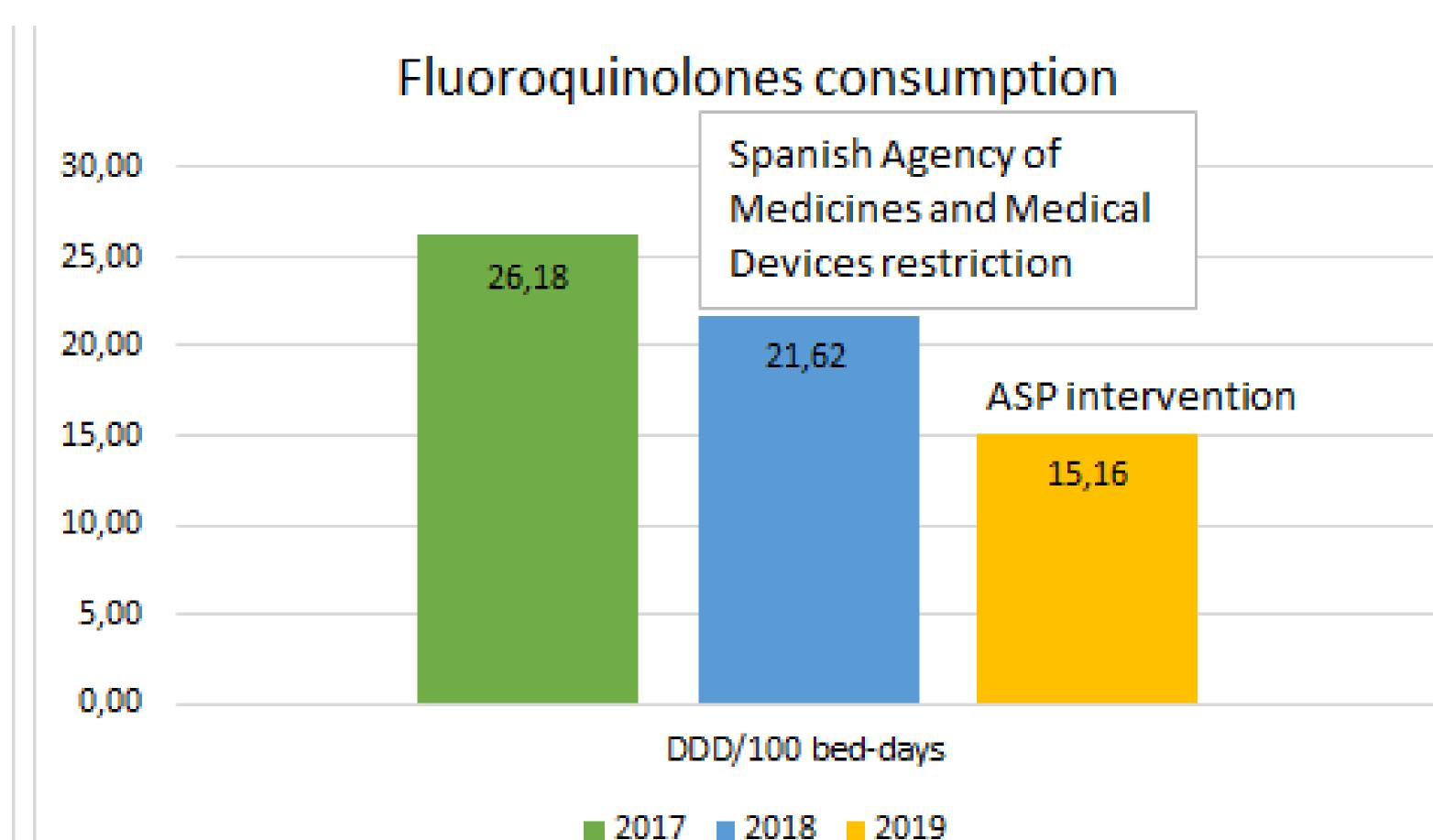
Aim and Objective

Materials and Methods

- Observational, descriptive, cross-sectional study.
- Antibiotic consumption data from January 2017 to December 2019 were analysed.
- Defined daily dose (DDD) per 100 bed-days was used as the indicator to measure antibiotic consumption.
- Global antibiotic consumption was reduced progressively: 133.85 DDD/100 bed-days (2017); 127.02 DDD/100 bed-days (2018) and 101.95 DDD/100 bed-days (2019).

Results





Conclusion and Relevance

- Antibiotic stewardship program interventions were effective to reduce antibiotic consumption.
- Prescription restrictions related to fluoroquinolones due to their safety profile and cefixime dosing intervention were effective and reflected a consumption reduction.
- HaH units could potentially benefit from the positive effects of antibiotic stewardship teams.