

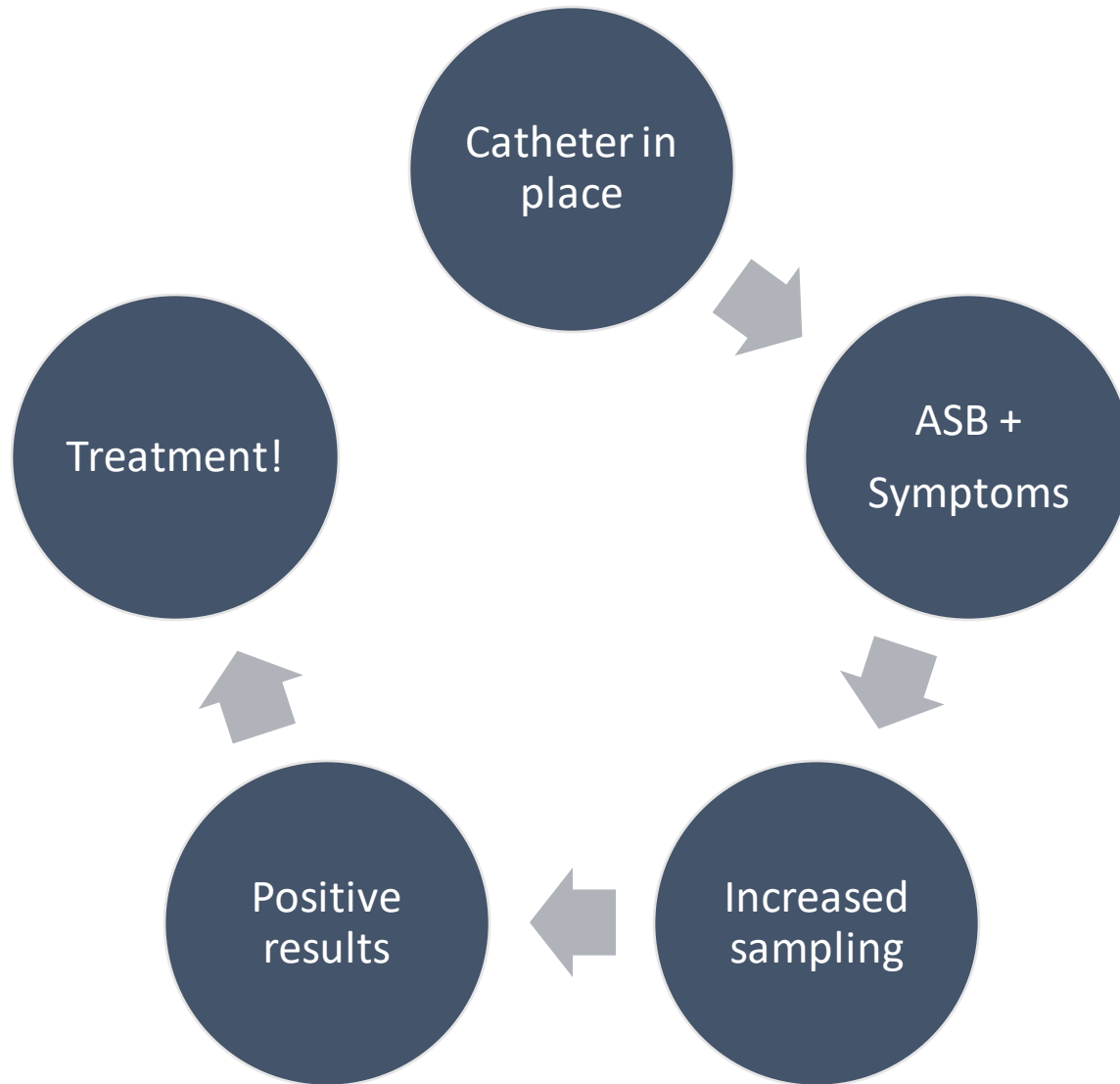


CENTER FOR
STEWARDSHIP
IN MEDICINE

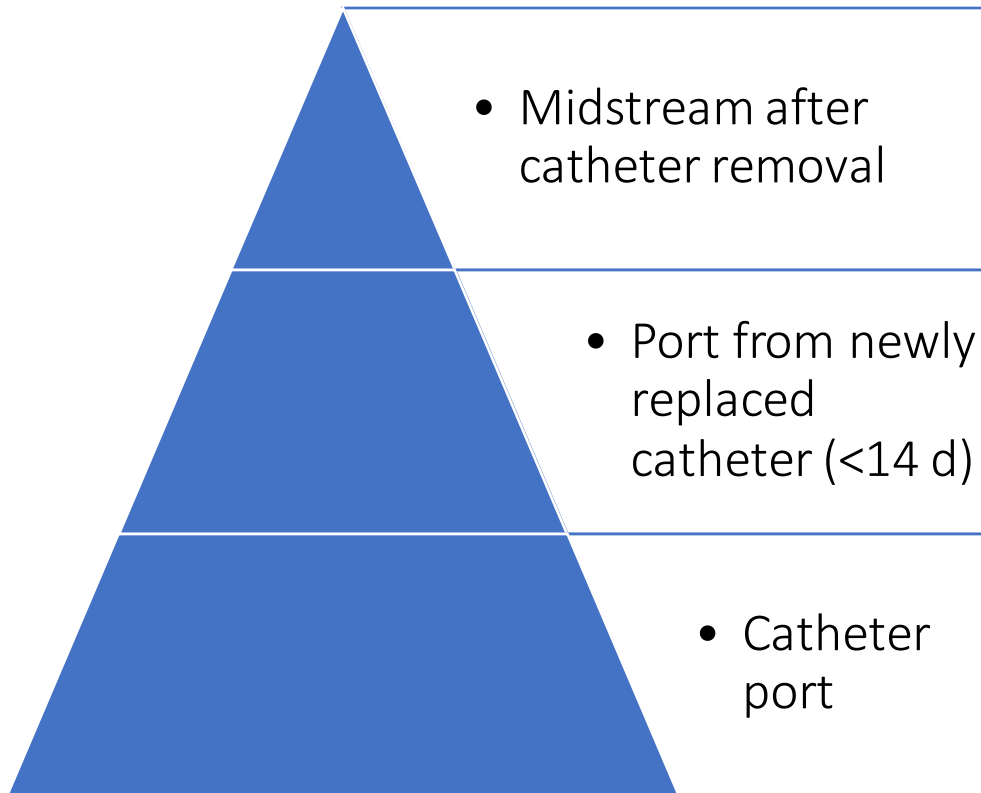
Jan 25, 2024

ASB In Challenging Populations: Catheter Associated ASB

Chloe Bryson-Cahn



SAMPLING – a bit controversial



Definitions

- CA-UTI – fever, rigors, suprapubic pain, flank pain, pelvic pain, or sepsis **without other cause**, cath <48h.
- CA-ASB – bacteria in urine culture without above symptoms
- S/sx in pt with SCI: malaise, lethargy, unease, incontinence, spasm, autonomic dysreflexia
- Symptom (pain, urgency, dysuria, fever) prevalence is similar in catheterized patients with and without bacteriuria



Prevalence of CA-ASB

Population	Prevalence
Persons with Spinal Cord Injury	
Intermittent catheter use	23-69
Sphincterotomy/condom catheter	57
Persons with indwelling catheter	
Short-term	3%-5%/catheter day
Long-term	100



Does Treatment of CA-ASB Help?

- 444 CA-bacteriuria episodes
 - 42% CA-UTI, 58% CA-ASB
- 3 related bacteremias were found
 - 2 CA-UTI, 1 CA-ASB
- 50% of pts with CA-ASB got abx for this
- Abx for bacteriuria did NOT change risk of bacteremia (from any source) or mortality

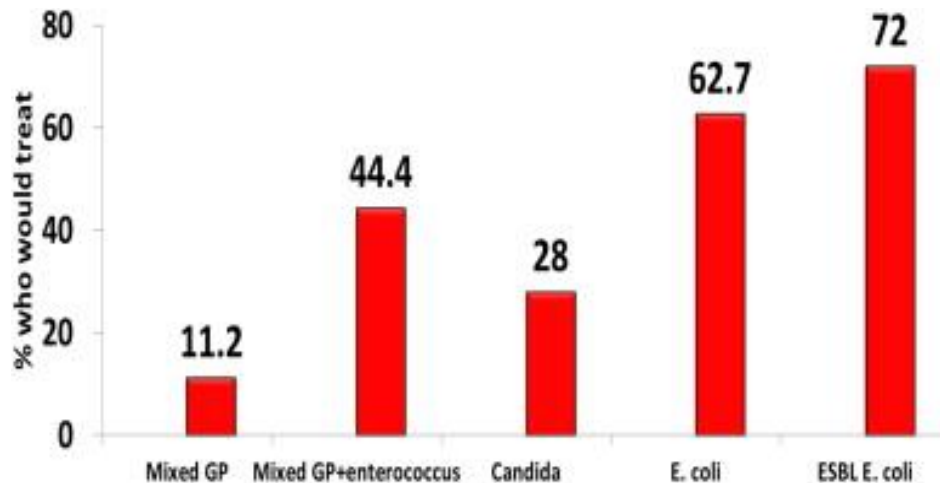
Knowledge of CA-ASB Management

Table 2. Participant characteristics and knowledge score (n= 169)

Characteristic	Respondents, n (%)	Knowledge score, mean (SD)	P value*
All (n= 169)		57.5 (18.8)	.002
Staff	15 (9)	71.4 (22.2)	
Residents	154 (91)	56.1 (18.0)	
Level of training (n= 168) [†]			< .0001
Postgraduate year 1	76 (45)	50.1 (17.9)	
Postgraduate year 2	47 (28)	61.0 (16.1)	
Postgraduate year 3-4	29 (18)	63.5 (16.5)	
Postgraduate year 5+	16 (9)	71.3 (21.5)	
Type of training (n= 154)			< .0001
Medicine	116 (75)	59.4 (17.8)	
Non-medicine	38 (25)	46.1 (14.5)	

Cognitive Biases in CA-ASB

- Pyuria, organism, older age increase treatment
- Catheterized pt with pyuria
 - 26% said they would treat BUT
 - 58% treated given that clinical scenario
- Organism type:



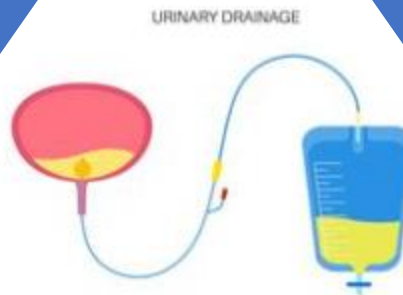
What Works

No catheter, no CA-ASB

Avoid that catheter in
the first place

Remove that catheter

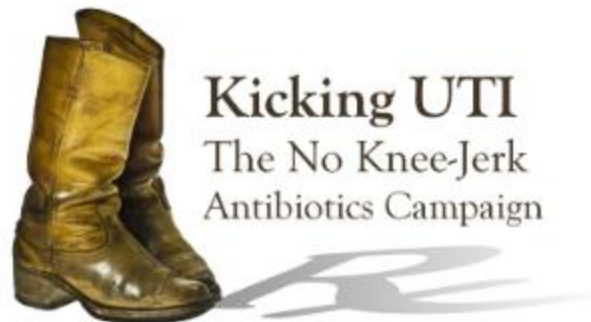
- Foley rounds
- Removal reminders
- Nursing driven protocols, stop orders



What Works

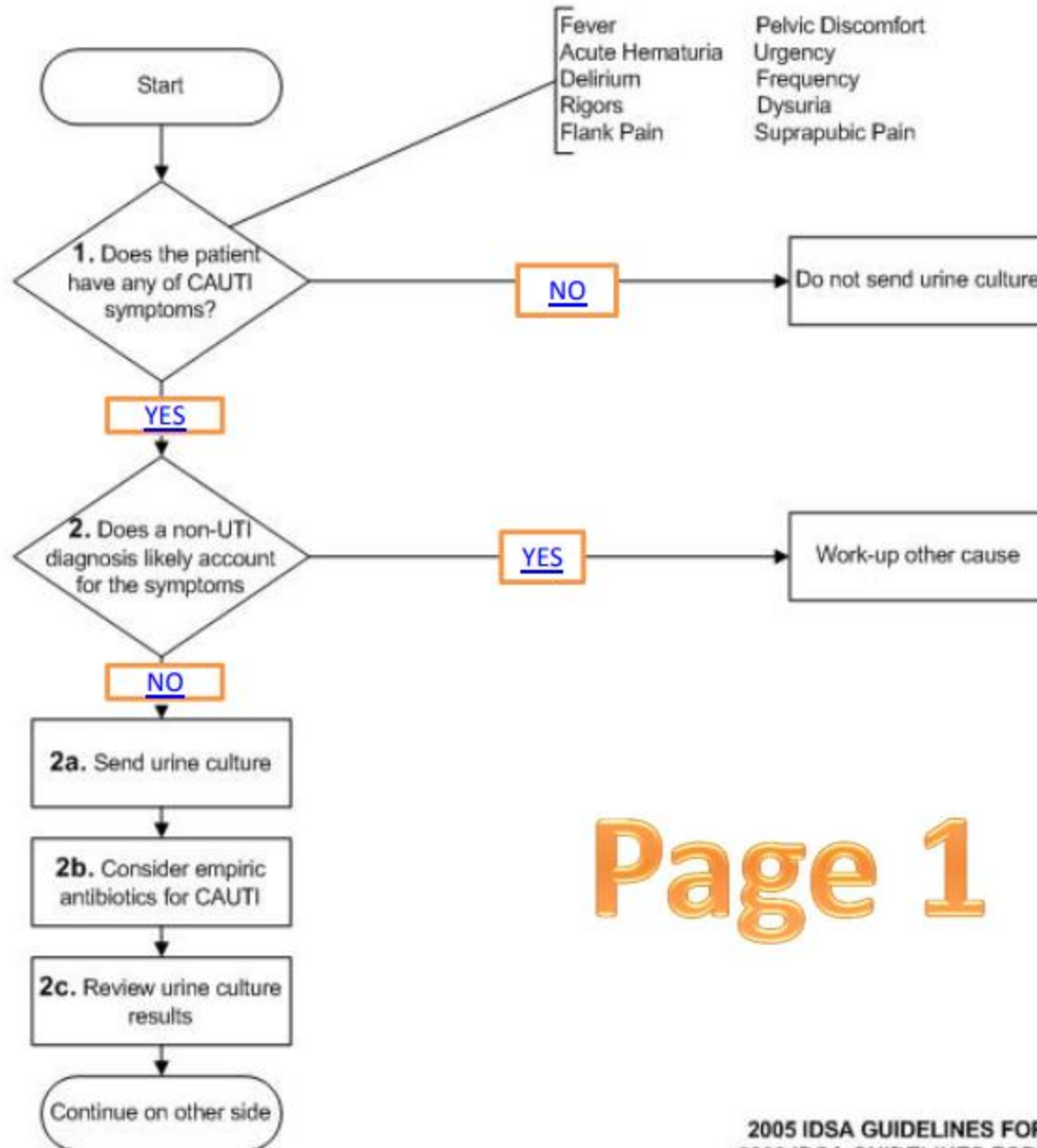
Urine culture stewardship

- The Kicking CAUTI: The No Knee-Jerk Antibiotics Campaign (VA acute care and LTC)
 - Education: case-based audit with feedback
 - "Actionable algorithm"

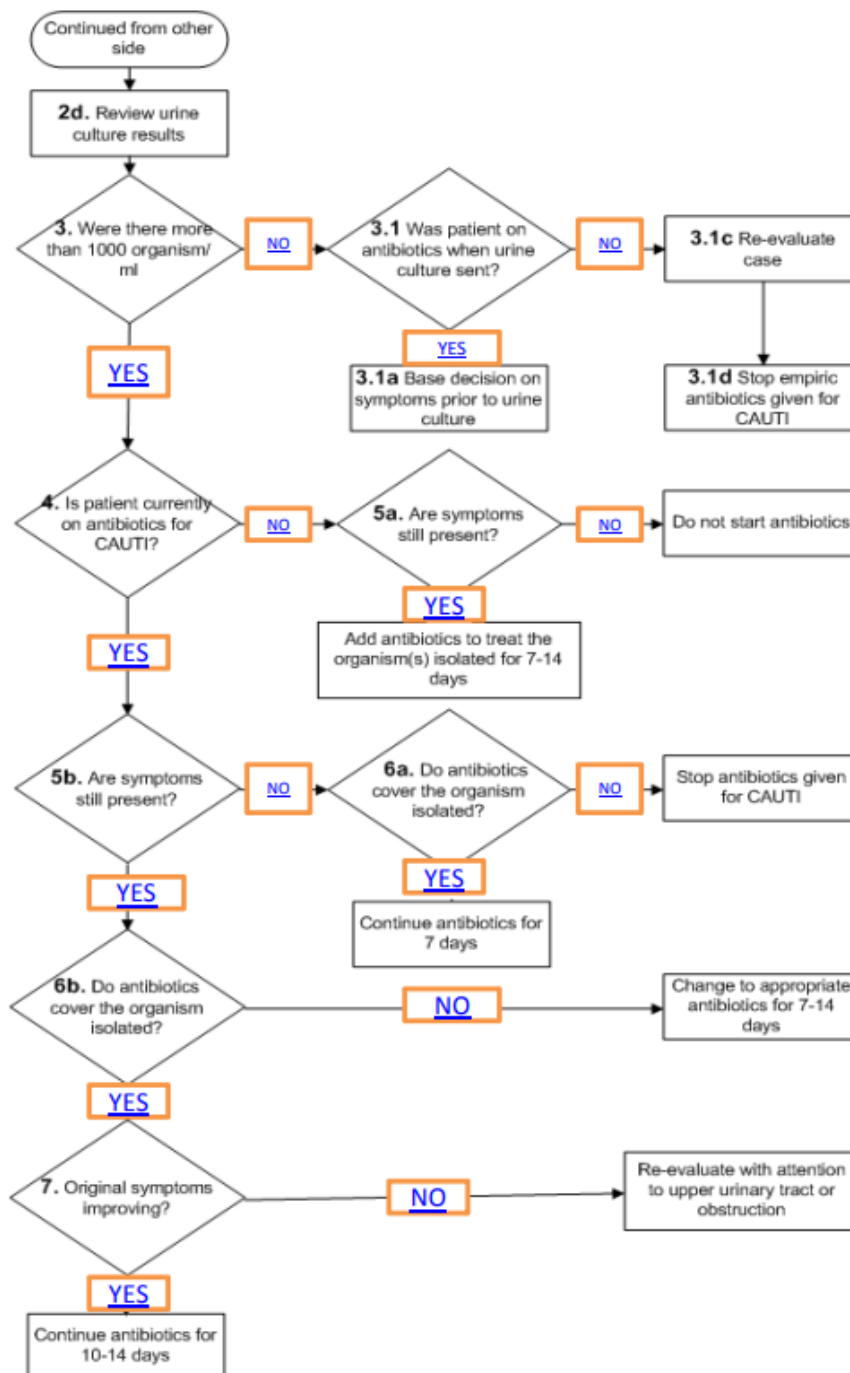


Catheter-Associated UTI (CAUTI) vs Asymptomatic Bacteriuria

(Patient with urinary catheter or catheter use within 48 hours)



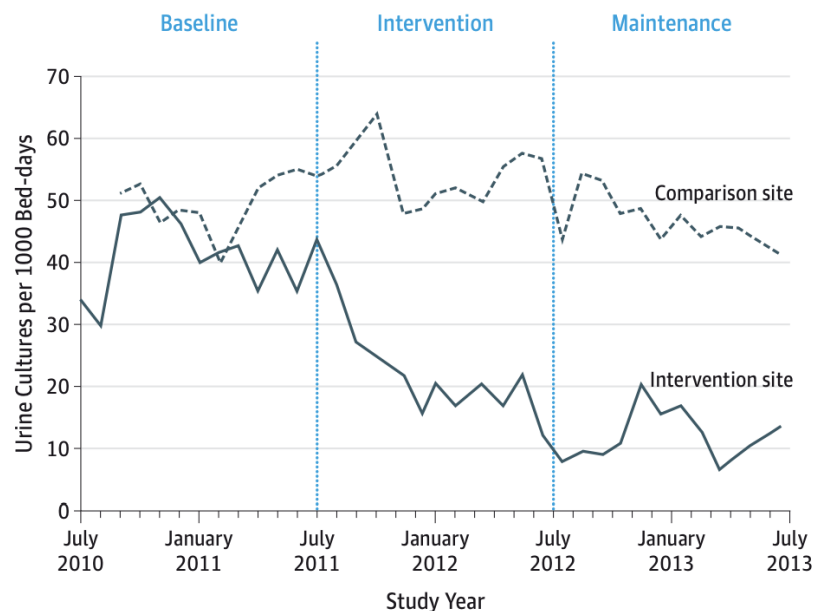
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What Works

Urine culture stewardship

Figure. Monthly Rates of Urine Culture Orders per 1000 Bed-days



	INTERVENTION SITE			COMPARISON SITE		
	Baseline	Intervention	Maintenance	Baseline	Intervention	Maintenance
ASB Treated per 1000 bed-days	1.6	0.6	0.4	0.6	0.6	0.5
CAUTI, not treated per 1000 bed-days	0.2	0.1	0.1	0.1	0.2	0.1

Other Low Hanging Fruit

- Duration of therapy
 - If no fever or s/sx of upper tract disease, some data support treating like cystitis
- Types of antibiotics (FQ avoidance)
- Specific organisms (not treating Candida, Coag neg Staph, some Strep, Lactobacillus)
- Catheter placement or admission cultures (not symptom driven)

