



UW TASP
tele-antimicrobial stewardship program



June 12th, 2018

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Agenda

- Chloe Bryson-Cahn: AS Research Update
- Case Discussions
- Open Discussion

Antimicrobial Stewardship Research Update

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June 12th, 2018

Clinical Utility of MRSA Nasal Screening to R/O MRSA Pneumonia: A Diagnostic Meta-Analysis

- 1st meta analysis to evaluate nares swab to r/o
- 22 studies; 5,163 patients

Type of Pneumonia	Studies, No.	Sensitivity (95% CI), %	Specificity (95% CI), %	PPV, %	NPV, %
All	22	70.9 (58.8–80.6)	90.3 (86.1–93.3)	44.8	96.5
CAP/HCAP	4	85.0 (59.7–95.6)	92.1 (81.5–96.9)	56.8	98.1
VAP	5	40.3 (17.4–68.4)	93.7 (77.1–98.4)	35.7	94.8

Clinical Utility of MRSA Nasal Screening to R/O MRSA Pneumonia: A Diagnostic Meta-Analysis

- Test characteristics for all MRSA Pneumonia
 - 71% Sensitive
 - 90% Specific
 - 97% Negative Predictive Value
- Note: recent decolonization, structural lung dz

Short-course vs. Long-course Oral Antibiotics for Infections Treated in Outpatients: Review of Reviews

- Compilation of 9 reviews
- Peds and adult studies evaluating short vs. long duration of treatment for bacterial infections

Short-course vs. Long-course Oral Antibiotics for Infections Treated in Outpatients: Review of Reviews

- kids {
- Tonsillopharyngitis
 - CAP
 - Acute otitis media
 - UTI

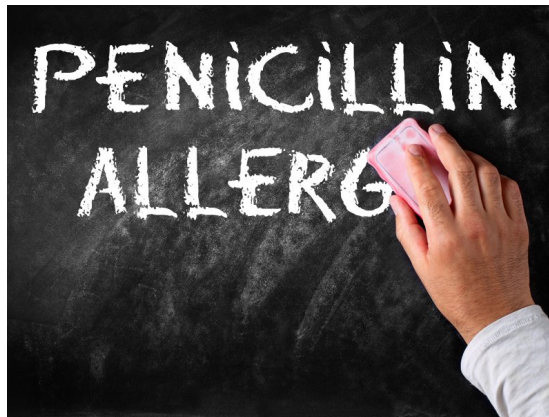
- adults {
- Acute bacterial sinusitis
 - Uncomplicated UTI in non-pregnant women
 - Acute pyelonephritis
 - CAP

Short-course vs. Long-course Oral Antibiotics for Infections Treated in Outpatients: Review of Reviews

- For all indications, short either equivalent or better than long duration

Antibiotic Use After Removal of Penicillin Allergy Label

- Follow-up of 100 patients
 - Previous PCN allergy with negative allergy test
- Results known:
 - 90% of parents
 - 84% of PCPs
 - BUT medical record still listed allergy in 52%



Antibiotic Use After Removal of Penicillin Allergy Label

- 36 received abx during follow-up (50% amox)
 - 1 rash, no serious adverse events
- 1 year cost savings: \$1368
- Potential ED cost savings (for 67000 visits/year)
 - \$192 K

Top Questions in Uncomplicated, Non-*Staph aureus* Bacteremia

- What is the role of oral abx?
- Clinical & PK/PD support high bioavailable agent
 - After susceptibility confirmed
- Oral beta-lactams step-down
 - OK for *S. pneumoniae* bacteremia
 - Enterobacteriaceae (high success, mixed results)
 - ? *Strep*, *Enterococcus*



Top Questions in Uncomplicated, Non-*Staph aureus* Bacteremia

- Shortest effective duration?
- Understudied. Multiple ongoing RCTs.
- For Enterobacteriaceae and *S.pneumo*
 - ≤ 7 days likely similar to 14 days
- Lack of data for *Pseudomonas*, *Acinetobacter*, *Enterococcus*, *Strep sp.*
- Note: Limited published data for 14 days too!

Top Questions in Uncomplicated, Non-*Staph aureus* Bacteremia

- Role of Repeat Blood Cultures?
- Data all retrospective, single-center
- Persistent bacteremia in ~15% (mostly GP)
- UTI, SSTI, gram negative
 - a/w even lower yield
 - longer abx course
 - no M&M difference



Extensive Impact of Non-Antibiotic Drugs on Human Gut Bacteria

- Tested 1,197 compounds (relevant doses) against 40 representative gut bacteria isolates
- Anticommensal: reduced growth of 1+ strain
- 156 abx: 78% anticommensal
- Non-antibiotic drugs: 27% anticommensal
 - 3% Anti-virals, anti-fungals
 - 24% were human targeted drugs

Extensive Impact of Non-Antibiotic Drugs on Human Gut Bacteria

- Human targeted drugs with anticommenal activity
 - Most affected <10 bacterial strains
 - 40 drugs affected 10+ strains
 - Methotrexate, loratadine, tamoxifen, amiodarone, clomiphene
 - 14 not previously described
- More abundant bacteria were significantly more susceptible

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