

PRELIMINARY RESULTS OF AN ANTIMICROBIAL STEWARDSHIP PROGRAMME IN AN ONCOLOGY DEPARTMENT

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Background and importance

Misuse of antibiotics has been related to the emergence of multidrug-resistant microorganisms which are related to worse outcome in infected patients.

Antimicrobial Stewardship Programs (ASPs) has been shown to improve antimicrobial use.

Aim and objectives

To describe the characteristics of antimicrobial prescriptions and analyse the impact of a specific ASP program implemented in an oncology department.

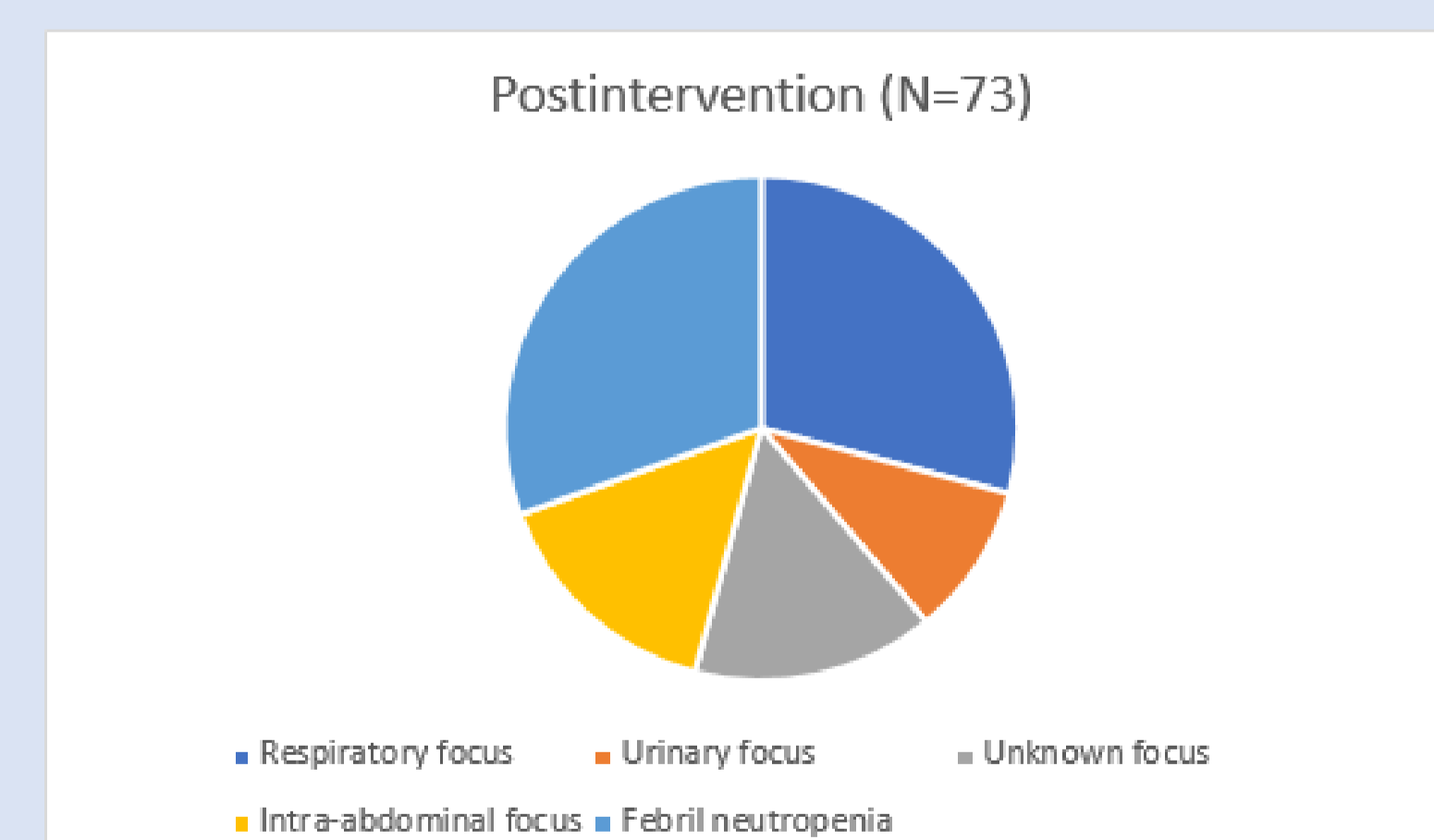
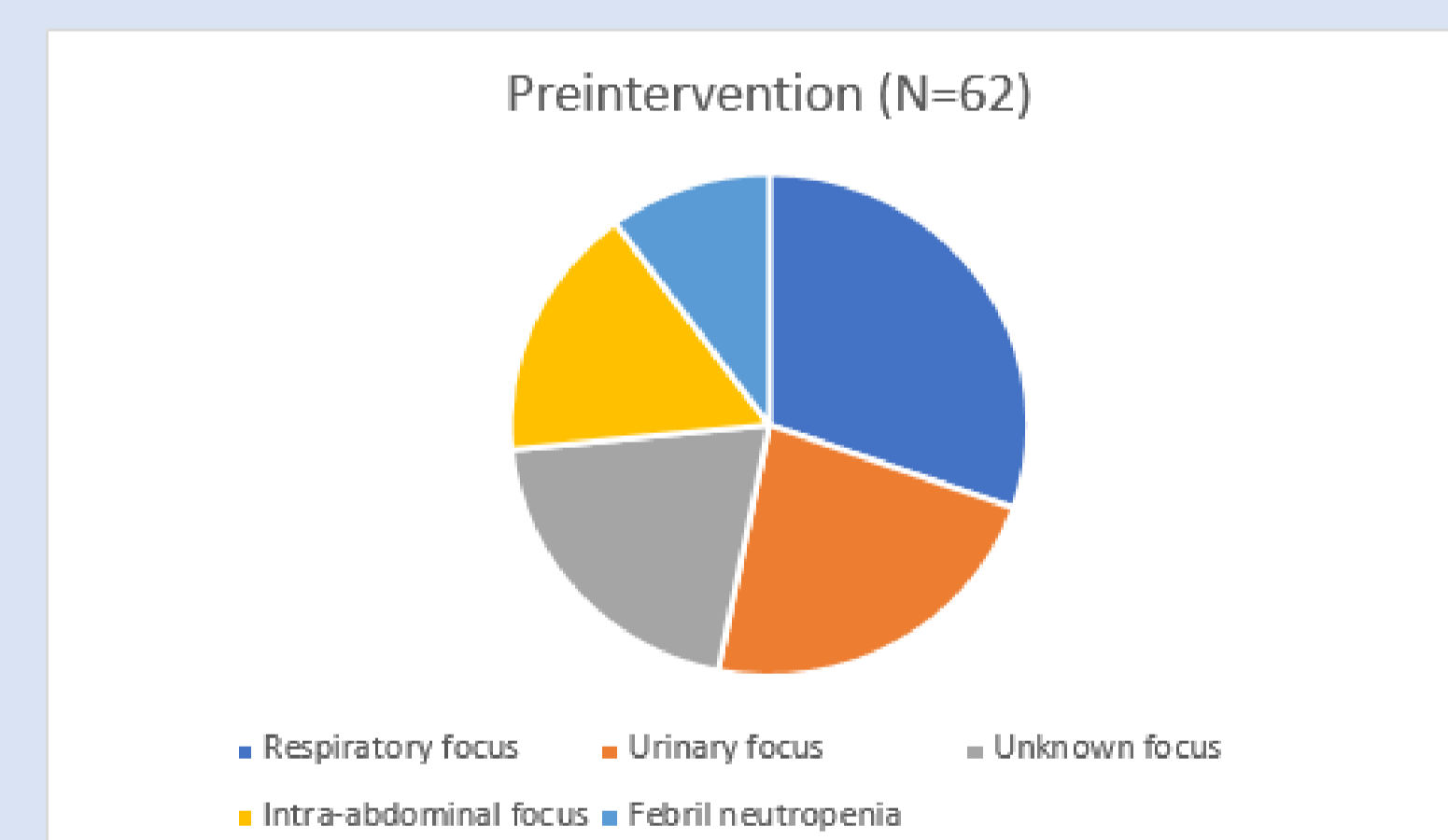
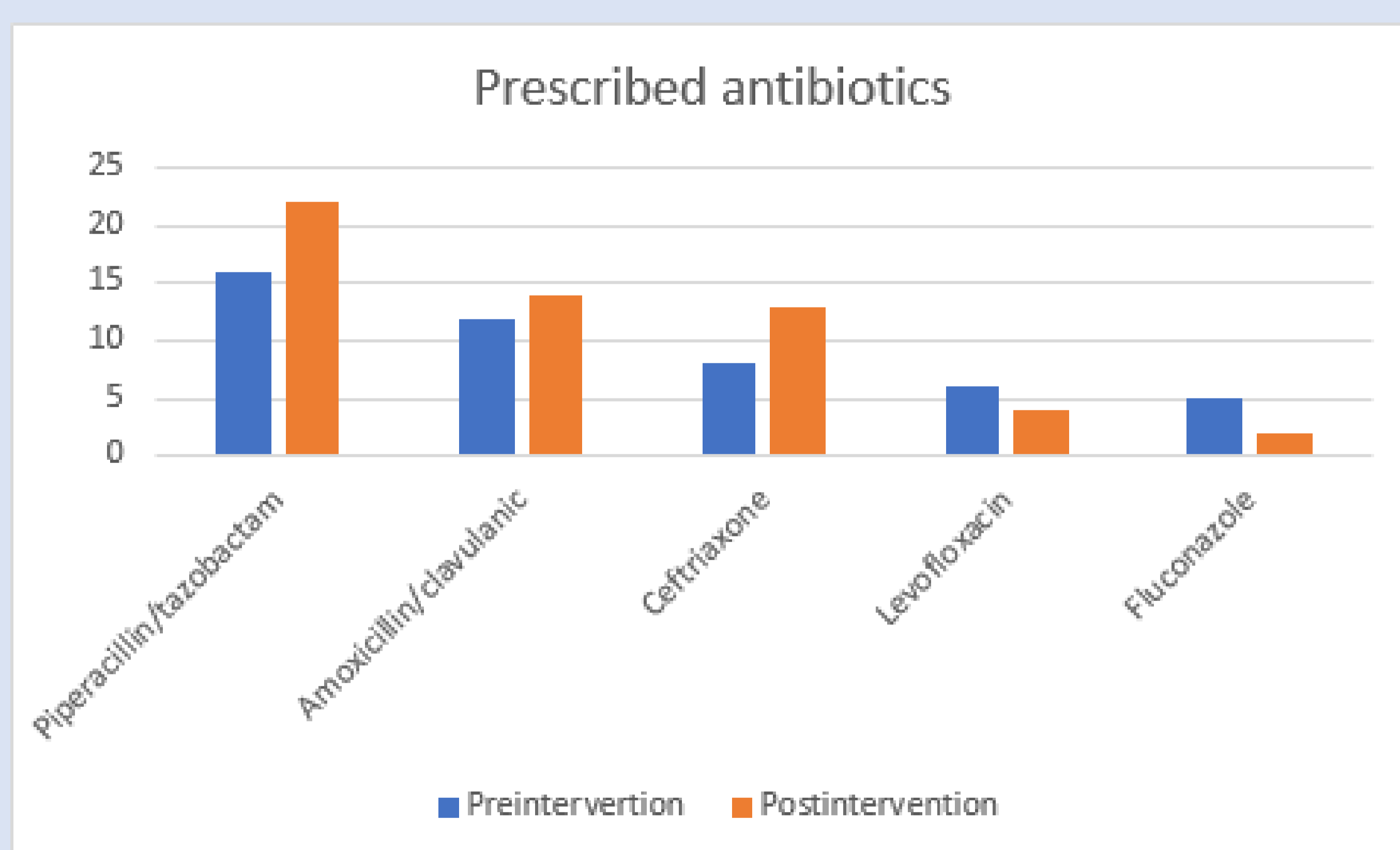
Material and methods

An before-after ASP intervention was implemented in an Oncology department in a tertiary hospital. Pre-intervention prescriptions characteristics were analysed through repeated point prevalence surveys in the previous year. The intervention was initiated in February 2019 based on a weekly ward round where non-tax advice was given to the oncologists about their active antibiotic prescriptions. Prescription features, rate of adherence to local guidelines and the type and acceptance of the recommendations given to stop or de-escalate were recorded.

Results

62 and 73 prescriptions were included in the pre- and post-intervention period respectively. Table 1 describes prescriptions characteristics in both periods.

Adherence to local guidelines was 51% and 59% in the pre- and post-intervention period ($p=0,39$). In the intervention period, 26% of prescriptions were stopped and 12% de-escalated. Acceptance was of 99%



Conclusion and relevance

An ASP weekly intervention in Oncology showed a slight increase in the adherence to local antibiotic guidelines. Nevertheless, this improvement is still not statistically significant due to the short time of follow-up and the small sample size, so further studies might be required to corroborate this improvement.