The global consumption of DDD/1000 patient-days and the A/C and P/T consumption was drawn from the first semester of 2017, and it was compared to the corresponding data in the first semester of 2016.

**BACKGROUND**

According to antibiotics' (AB) consumption in surgery service in our centre in 2016, it was observed that an improvement in the use of AB in the surgery service was necessary, since the data are beyond the consumption of AB in the region where our hospital is situated.

**PURPOSE**

To analyse the effectiveness of a programme of pharmacist intervention in the reduction of the global use of antibiotics in inpatient care in the surgery service, with special focus on amoxicillin-clavulanic (A/C) and piperacillin-tazobactam (P/T) consumption.

**RESULTS**

- The global consumption of antibiotics in the surgery service was reduced 10.15%.
- The A/C consumption in the surgery service was reduced 27.21%.
- The P/T consumption in the surgery service was reduced 18.84%.

<table>
<thead>
<tr>
<th>CONSUMPTION OF ANTIBIOTICS</th>
<th>DDD/1000 patient-days 2016</th>
<th>DDD/1000 patient-days 2017</th>
<th>Reduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>GLOBAL</td>
<td>970.75</td>
<td>847.37</td>
<td>-10.15%</td>
</tr>
<tr>
<td>AMOXICILLIN-CLAVULANIC</td>
<td>340.48</td>
<td>247.78</td>
<td>-27.21%</td>
</tr>
<tr>
<td>PIPERACILLIN-TAZOBACTAM</td>
<td>259.47</td>
<td>210.58</td>
<td>-18.84%</td>
</tr>
</tbody>
</table>

**CONCLUSION**

The incorporation of a programme of interdisciplinary intervention to optimise the adaptation and duration of antibiotic treatment in the general surgery floor has achieved a reduction in the consumption of antibiotics, specially A/C and P/T, with the presence of the pharmacist.

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