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

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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.

Aim and Objective

• To analyse the influence of the ASP interventions in a HaH unit.

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.

Results

• 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).

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.