IMPLEMENTATION OF SUPPORT PROGRAM ANTIMICROBIAL PRESCRIPTION – 3 months experience

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Background
According to legislation, the consumption of carbapenems and quinolones should be reduced by 50% until 2020. The Support Program for Antimicrobial Prescription aims surveillance of antibiotic consumption and a decrease in incidence rate of multidrug-resistant microorganisms.

Aim
The objectives of GCL-PPCIRA (Local Coordination Group Prevention Program and Infection Control and Antimicrobial Resistance) since June 2015, were to reduce the consumption of carbapenems by 10% and quinolones by 5% until the end of the year reducing indicators infection DDD (Defined Daily Dose) 2015/2014 and DHD (DDD / 1000 inhabitants / day) 2015/2014 (national target <95%)

Methods
Longitudinal prospective study. Prescriptions are assessed by the pharmacists of Antibiotic Commission who review the medical records daily and classify the requirements on empirical prescriptions (according to therapeutic protocols or awaiting analytical results), inappropriate prescribing and documented prescriptions. If necessary, the prescriptions are changed by the Infectiologist. To monitor the consumption and infection indicators we compared the data from January to August 2015 with the same period 2014. Inclusion criteria: patients admitted between June and August 2015 and discharge / death until 31 August.

Results
During the study period were identified 263 patients with prescription carbapenems and quinolones. We analyzed in 183 carbapenems prescription and 81 quinolones prescriptions. We identified 152 men and 111 women, mean age 68.8 ± 15.9 years.

Conclusions
The proposed objective of reduction in consumption was reached by August with a reduction of over 10% and 5% respectively. As for the national target to reduce the DHD was fulfilled. This work allowed to obtain reliable indicators of infection and intervene in a timely manner in the medical prescription. There has been investment in surveillance of surgical prophylaxis protocols, as reflected in the decreasing consumption of oral quinolones and the fulfillment of targeted therapy.

Bibliography

Average duration of therapy with and without PPCIRA interventions (p=0.0001)