

## Antibiotic use prevalent in hospice patients despite limited evidence of its value

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New research suggests that use of antibiotics is still prevalent among terminal patients who have chosen hospice care as an end-of-life option, despite little evidence that the medications improve symptoms or quality of life, and sometimes may cause unwanted side effects.

The use of <u>antibiotics</u> is so engrained in contemporary medicine that 21 percent of patients being discharged from hospitals directly to a <u>hospice</u> program leave with a prescription for antibiotics, even though more than one fourth of them don't have a documented infection during their <u>hospital admission</u>.

About 27 percent of hospice patients are still taking antibiotics in the final week of their life.

This raises serious questions about whether such broad and continued antibiotic use is appropriate in so many hospice cases, experts say, where the underlying concept is to control pain and protect the remaining quality of life without aggressively continuing medical treatment.

Additional concerns with antibiotic use, the study concluded, include medication side effects and adverse events, increased risk of subsequent opportunistic infections, prolonging the dying process and increasing the risk of developing antibiotic resistant microorganisms.

The findings were just published in *Antimicrobial Agents and Chemotherapy* by researchers from Oregon State University and the



Oregon Health & Science University. It was supported by the National Institutes of Health.

"Hospice care is very patient centered and in terminal patients it focuses on palliative care and symptom relief, not curative therapy," said Jon Furuno, an associate professor in the Oregon State University/Oregon Health & Science University College of Pharmacy.

"It's not for everyone, and it's a serious decision people usually make in consultation with their family, nurses and doctors. These are tough conversations to have.

"Having decided to use hospice, however, the frequency and prevalence of antibiotic use in this patient population is a concern," Furuno said. "Antibiotics themselves can have serious <u>side effects</u> that sometimes cause new problems, a factor that often isn't adequately considered. And in terminally-ill people they may or may not work anyway."

Issues such as this, Furuno said, continue to crop up in the evolving issue of <u>hospice care</u>, which is still growing in popularity as many people choose to naturally allow their life to end with limited medical treatment and often in their own homes. Hospice is covered by Medicare for people with a life expectancy of less than six months, helps to control medical costs and reduce hospital stays, and its services are now used by more than one third of dying Americans.

Unnecessary and inappropriate antibiotic use is already a concern across all segments of society, researchers said in the report, and more efforts are clearly needed to address the issue in hospice patients. The design of the study probably leads to it underestimating the significance of the problem, the researchers wrote in their conclusion.



## Provided by Oregon State University

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