

Better UTI monitoring needed after hospital admission in adults

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(HealthDay)—Healthcare-associated (HA), community-onset (CO)

urinary tract infection (UTI) may be common within 30 days following hospital discharge, according to a study published online June 20 in *Infection Control & Hospital Epidemiology*.

Miriam R. Elman, from Oregon Health and Science University in Portland, and colleagues used data from an academic, quaternary care, referral center to retrospectively identify 3,273 hospitalized adults at risk for HA-UTI from May 2009 to December 2011. There was a 30-day, post-discharge follow-up for patients who did not experience a UTI during the index hospitalization to identify cases of potentially HA-CO UTI.

The researchers found that the incidence of HA-CO UTI in the 30 days post discharge was 29.8 per 1,000 patients. Some independent risk factors for HA-CO UTI were paraplegia or quadriplegia (adjusted odds ratio [aOR], 4.6; 95 percent confidence interval [CI], 1.2 to 18.0), indwelling catheter during index hospitalization (aOR, 1.5; 95 percent CI, 1.0 to 2.3), prior piperacillin-tazobactam prescription (aOR, 2.3; 95 percent CI, 1.1 to 4.5), prior penicillin class prescription (aOR, 1.7; 95 percent CI, 1.0 to 2.8), and [private insurance](#) (aOR, 0.6; 95 percent CI, 0.4 to 0.9).

"These data suggest that surveillance efforts may need to be expanded to capture the full burden to patients and better inform antibiotic prescribing decisions for patients with a history of hospitalization," conclude the authors.

One researcher reports ties to the pharmaceutical industry.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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