

Guidance provided for antibiotic stewardship in pediatrics

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(HealthDay)—In an American Academy of Pediatrics policy statement,

published online Dec. 28 in *Pediatrics*, guidance is provided for inpatient and outpatient antibiotic stewardship.

Jeffrey S. Gerber, M.D., Ph.D., from the Perelman School of Medicine at the University of Pennsylvania in Philadelphia, and colleagues discuss inpatient and outpatient antibiotic stewardship programs (ASPs) in pediatrics, including essential personnel, infrastructure, and activities needed.

The authors note that the American Academy of Pediatrics and Pediatric Infectious Diseases Society recommend establishing ASPs to improve antibiotic prescribing; the ASPs should include specialists with pediatric expertise. Ideally, inpatient ASPs should include a medical director and clinical pharmacist, both with expertise in pediatric infectious diseases and/or antibiotic stewardship. Core interventions for inpatient ASPs can use clinical guidelines, prior approval, and postprescription review and feedback. Pharmacy-driven interventions can be included in inpatient ASPs. Standardized approaches for [antibiotic prescribing](#), including clinical guidelines and/or decision support, should be considered for outpatient primary care practices, urgent care clinics, and emergency departments. Outpatient stewardship can focus on judicious antibiotic use and can emphasize use of the narrowest-spectrum antibiotics for the shortest duration of therapy to adequately treat infections.

"A growing body of evidence demonstrates that ASPs reduce antibiotic overuse while improving patient outcomes," the authors write.

"Consistent with the U.S. Centers for Disease Control and Prevention, the Infectious Diseases Society of America, the Society for Healthcare Epidemiology of America, and the Pediatric Infectious Diseases Society, the American Academy of Pediatrics [endorses] the development and implementation of ASPs across pediatric health care settings."

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