

Infectious Diseases Society of America issues guidance on treating antimicrobial-resistant infections

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(HealthDay)—In new guidance issued by the Infectious Diseases Society of America and published on its website, suggestions are presented for treatment of AmpC β -lactamase-producing Enterobacterales (AmpC-E), carbapenem-resistant *Acinetobacter baumannii* (CRAB), and *Stenotrophomonas maltophilia* infections.

Pranita D. Tamma, M.D., from Johns Hopkins University School of Medicine in Baltimore, and colleagues offer guidance for the treatment of AmpC-E, CRAB, and *S. maltophilia* infections. Questions about treatment were formulated and answers were presented as suggestions.

The suggestions for treatment are provided with the assumption that the causative organism has been identified and results of antibiotic susceptibility are known. The authors note that empiric treatment decisions should be guided by the most likely pathogen, illness severity, and likely source of infection. These decisions should be refined based on the identity and susceptibility profile of the pathogen and identification of any prominent β -lactamase genes. A distinction between bacterial colonization and [infection](#) is important for CRAB and *S. maltophilia*. Empiric antibiotic regimens that are commonly selected are typically not active against CRAB and *S. maltophilia* infections. Clinicians are advised that prolonged treatment courses are not necessarily required for antimicrobial-resistant pathogens compared with infections caused by the same species, which have a more susceptible phenotype. Host factors related to immune status, ability to attain source control, and general response to therapy should be considered when ascertaining [treatment](#) duration.

"By compiling the best science available, this guidance assists [clinicians](#) with caring for patients with challenging infections that are associated with significant morbidity and mortality," Tamma said in a statement.

More information: [Abstract/Full Text](#)

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