

Lessons learned in COVID-19: New guidance for antibiotic use in a pandemic

September 14 2022



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Health care professionals should use antibiotics and diagnostic testing judiciously during the early stages of an epidemic, despite a strong desire to do something for patients when treatment options are limited, the Society for Healthcare Epidemiology of America said in a statement released today.



The statement follows a national report that found 80% of patients hospitalized in the first six months of the COVID-19 pandemic were prescribed antibiotics on admission even though they were rarely indicated at that point. Use of antibiotics in situations where they are not needed or beneficial leads to the growth of hard-to-treat resistant bacteria.

"The COVID-19 pandemic highlights the human desire of health care personnel to intervene, particularly when a patient is severely ill, which can lead to a suspension of evidence-based medicine at the bedside," according to the SHEA Statement on Antibiotic Stewardship in Hospitals During Public Health Emergencies.

Uncertainty about the COVID-19 diagnosis was paired with a desire to help patients, concern about bacterial co-infections, and misleading results from a variety of <u>diagnostic tests</u> to contribute to the rise in overuse of <u>antibiotics</u> early in the pandemic, the statement said.

"The COVID-19 pandemic is ripe with lessons for future viral pandemics," said Tamar Barlam, MD, lead author of the paper and chair of the SHEA Antimicrobial Stewardship Committee. "The <u>overuse of antibiotics</u> seen in the pandemic points to a need to strengthen antibiotic stewardship programs, so they are positioned to provide guidance across disciplines."

"The statement provides strategies for hospitals and health care personnel to improve antibiotic prescribing in the face of new infectious disease outbreaks. It describes circumstances when an antibiotic should be considered in a respiratory viral epidemic, and outlines situations where diagnostic tests are appropriate."

The guidance comes on the heels of a special report from the Centers for Disease Control and Prevention that concluded antimicrobial-resistant



hospital-onset infections and deaths increased by at least 15% during the first year of the pandemic.

"These setbacks can and must be temporary," CDC Director Rochelle Walensky, M.D., MPH, said in the foreword to the CDC report. "The COVID-19 pandemic has made it clear—prevention is preparedness. We must prepare our public health systems to fight multiple threats, simultaneously. Because antimicrobial resistance will not stop, we must meet the challenge."

The SHEA statement was published today in the organization's journal *Infection Control & Hospital Epidemiology*.

More information: Tamar F. Barlam et al, SHEA statement on antibiotic stewardship in hospitals during public health emergencies, *Infection Control & Hospital Epidemiology* (2022). DOI: 10.1017/ice.2022.194

Provided by Society for Healthcare Epidemiology of America

Citation: Lessons learned in COVID-19: New guidance for antibiotic use in a pandemic (2022, September 14) retrieved 6 May 2024 from https://medicalxpress.com/news/2022-09-lessons-covid-guidance-antibiotic-pandemic.html

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