

Reduction in Antibiotic Use for Urinary Tract Infections in Long-Term Care Facilities

Choosing Wisely Canada Recommendation

Don't use antimicrobials to treat bacteriuria in older adults unless specific urinary tract symptoms are present.

Practice Points

1. In long-term care facilities (LTCFs), antibiotics are prescribed more often for urinary tract infections (UTIs) than any other diagnosis.
2. Antimicrobial treatment studies for asymptomatic bacteriuria in older adults demonstrate no benefits and show increased adverse antimicrobial effects.

Methods

1. Data was obtained from the Infection Prevention and Control Programs of Eastern Health (EH), Central Health (CH) and Western Health (WH).
2. Antibiotic use rate was calculated as the number of prescriptions per 10,000 resident days.
3. Inappropriate antibiotic use was determined based on consensus criteria developed by each Regional Health Authority (RHA).

Results

Table 1. Antibiotic Use and Inappropriateness by RHA

RHA		2016	2017
Eastern Health	Antibiotics Prescribed; (N)	737	694
	Inappropriate Antibiotic Use; N (%)	506 (69)	364 (52)
Central Health	Antibiotics Prescribed; (N)	252	292
	Inappropriate Antibiotic Use; N (%)	115 (46)	164 (56)
Western Health	Antibiotics Prescribed; (N)	234	268
	Inappropriate Antibiotic Use; N (%)	140 (60)	180 (67)

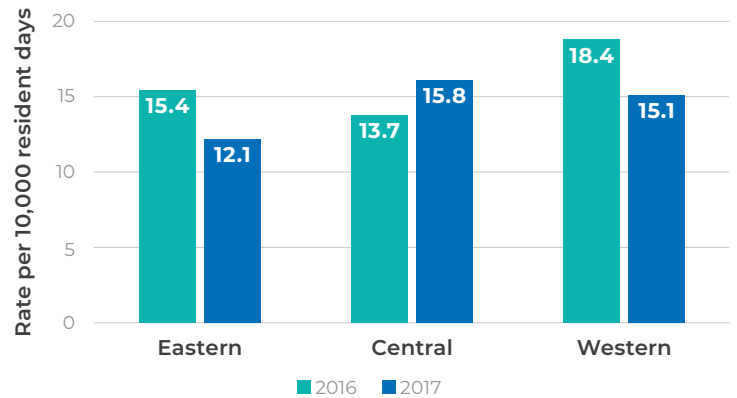


Fig. 1. Rate of Antibiotic Use in Long-Term Care Facilities Analyzed by RHA

- Rate of antibiotic use and percentage of inappropriate use varied by LTCF.

Conclusions

1. From 2016–2017, rate of antibiotic use decreased overall for both EH and WH but increased for CH. Inappropriateness rate decreased only for EH.
2. Overall, from 2016–2017, the percentage of antibiotics prescribed that were inappropriate decreased from 62% to 56% and varied by LTCF and RHA.
3. Inappropriate antibiotic use for asymptomatic bacteriuria in LTCFs in NL is still high. Targeted interventions to reduce inappropriate use are necessary.