

Antimicrobial use in: Long-term care facilities

1 / **20** residents received at least one antimicrobial on any given day.

7/10 antimicrobials were prescribed for treatment of an infection and 3 in 10 for prophylaxis.



/ 4 of the prophylaxis courses

were given to prevent urinary tract infections. While this practice may reduce the risk of infection in women, there is no evidence about its effectiveness when applied widely to elderly patients.

In addition, this practice is associated with increased antimicrobial resistance. Most prophylaxis courses may therefore represent unnecessary use of antimicrobials.

Solutions

Prudent use of antimicrobials in healthcare settings is pivotal to combating antimicrobial resistance. The following actions can be taken in hospitals and long-term care facilities:



Avoid prolonged and unnecessary antimicrobial prophylaxis.



Use narrow-spectrum antibiotics when possible.



Perform appropriately timed, parenteralto-oral switch when possible.





Always document the indication of antimicrobial treatment, drug choice, dose, route of administration and duration of treatment in the patient chart.

Implement antimicrobial stewardship programmes.







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