

10.18 Antimicrobial Prescribing in Post-Stroke Aspiration Pneumonia

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Background: Aspiration pneumonia is a common in patients who have had an acute stroke. Empiric antibiotics are frequently prescribed at the time of aspiration. There is a high rate of spontaneous recovery in those who have an aspiration event and these individuals do not require antimicrobial therapy. The overall aim of this audit was to ensure appropriate antimicrobial stewardship in this setting.

Methods: Prospective was collected for patients with confirmed or suspected aspiration pneumonia. Data review included whether speech and language opinion occurred prior to aspiration, any changes to diet, evidence suggestive of a bacterial process and antibiotic choice and duration.

Results: Data was collected on 42 patients over a three month period. Initial swallow assessment was documented in 37 patients. 66% of patients had SIRS criteria. 75% had a rise in inflammatory markers. 66% of patients had confirmed consolidation on their chest Xray. All patients had formal speech and language reviews during their inpatient stay. 90% of patients had modifications to their feeding regime. One patient had their antibiotics de-escalated when their bloods, imaging and vital signs improved.

Conclusion: Patients who do not have SIRs criteria, a rise in inflammatory markers or CXR consolidation should have antimicrobials reviewed and de-escalated as appropriate.

data

Key Words

Aspiration Pneumonia

Anti-microbial stewardship

Disclosures

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