## 2.07 A review of Azithromycin Prophylaxis; Appropriateness of Initial Prescription and Safety Monitoring

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**Background:** Azithromycin prophylaxis in appropriately selected Respiratory patients reduces exacerbation frequency [1]. This quality improvement initiative reviews patients receiving prophylactic Azithromycin. This assesses if initial azithromycin prescriptions were according to guidelines and, determines if follow-up measures were taken ensuring no adverse side effects (ASE) or antimicrobial resistance (AMR).

**Methods:** Appropriately, commenced patients, who demonstrated exacerbation reduction, were enrolled on to an on-going safety-monitoring pathway. If azithromycin was inappropriately commenced, if no improvement was noted, or if ASE/AMR were identified, the patient was enrolled onto a structured withdrawal pathway.

**Results:** Initial data suggests high incidence of inappropriately commenced azithromycin with a discontinuation rate to date, of 63%. Total ASE incidence is high with QTC prolongation, deranged liver function tests and potential drug interactions existing in both groups. AMR has not been identified to date. No deterioration of chest health has been observed in those who have had their azithromycin discontinued.

**Conclusions:** This initiative highlights high levels of inappropriate azithromycin prescription and lack of safety measures. We suggest a formal ongoing Advanced Nurse Practitioner led azithromycin clinic to monitor patients commenced on azithromycin. Our audit has demonstrated that this evaluation and discontinuation is safe and has prevented some potentially adverse events.

**Keywords: COPD, Azithromycin**

**Disclosures: the authors declare that they have no conflict of interest**

**References**: [1] https://pubmed.ncbi.nlm.nih.gov/24746000/