Antimicrobial stewardship programs in Emilia-Romagna, Italy

A Pan1*, C Gagliotti2, M Arlotti2, P Bassi2, L Bertozzi2, M Borsari2, C Cancellieri2, R Carletti2, S Giordani2, M Libanore2, G Magnani2, P Marchegiano2, E Mazzini2, S Mezzadri2, M Minghetti2, S Nola2, C Puggioli2, P Ragni2, G Ratti2, M Sisti2, C Vandelli2, P Viale2, P Vitali2, ML Moro1

From International Conference on Prevention & Infection Control (ICPIC 2011)
Geneva, Switzerland. 29 June – 2 July 2011

Introduction / objectives
To evaluate the state-of-the-art of antimicrobial stewardship programs in Emilia-Romagna we sent a questionnaire to university hospitals (UH) and Local Health Authorities hospitals (LHAH) of Emilia-Romagna.

Methods
A multiple-choice questionnaire was sent to all public UH/LHAH of the region. The survey was constituted by 18 different questions, in 7 sections. An 8 parameters antimicrobial stewardship (AMS) score was calculated (score 0-14).

Results
All 17 UH/LHAH completed the survey. An antimicrobial stewardship group was present in 11/17 (58%) UH/LHAH. All UH/LHAH had implemented some antimicrobial control strategies. We analysed 4 areas. A) Restricted formulary: all UH/LHAH had restricted formularies, with a median of 12 antimicrobials. B) Education: courses on surgical prophylaxis had been performed in 56% of surgical specialties, courses on antimicrobial therapy in 47% of UH/LHAH over the last year. C) Guidelines: guidelines on surgical antibiotic prophylaxis and on antimicrobial therapy were available in 100% and 71% of UH/LHAH, respectively. D) Data feed back: data on antibiotic consumption and on antimicrobial resistance were periodically fed back to the wards by 100% and 88% of UH/LHAH, respectively. The AMS score varied significantly among UH/LHAH, from 2 to 13 points.

Conclusion
All UH/LHAH have implemented some kind of antimicrobial stewardship program, although significant differences exists between centres. To face these differences a regional project has been implemented.

Disclosure of interest
None declared.

Author details
1Area Rischio Infettivo, Agenzia Sanitari e Sociale Dell’Emilia-Romagna, Bologna, Italy. 2Regione Emilia-Romagna, Bologna, Italy.

Published: 29 June 2011

doi:10.1186/1753-6561-5-S6-P143
Cite this article as: Pan et al.: Antimicrobial stewardship programs in Emilia-Romagna, Italy. BMC Proceedings 2011 5(Suppl 6):P143.

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