

# It's about time: ANTIBIOTIC DURATION

The recommended duration of antibiotic therapy for many infections is probably **SHORTER** than you think.

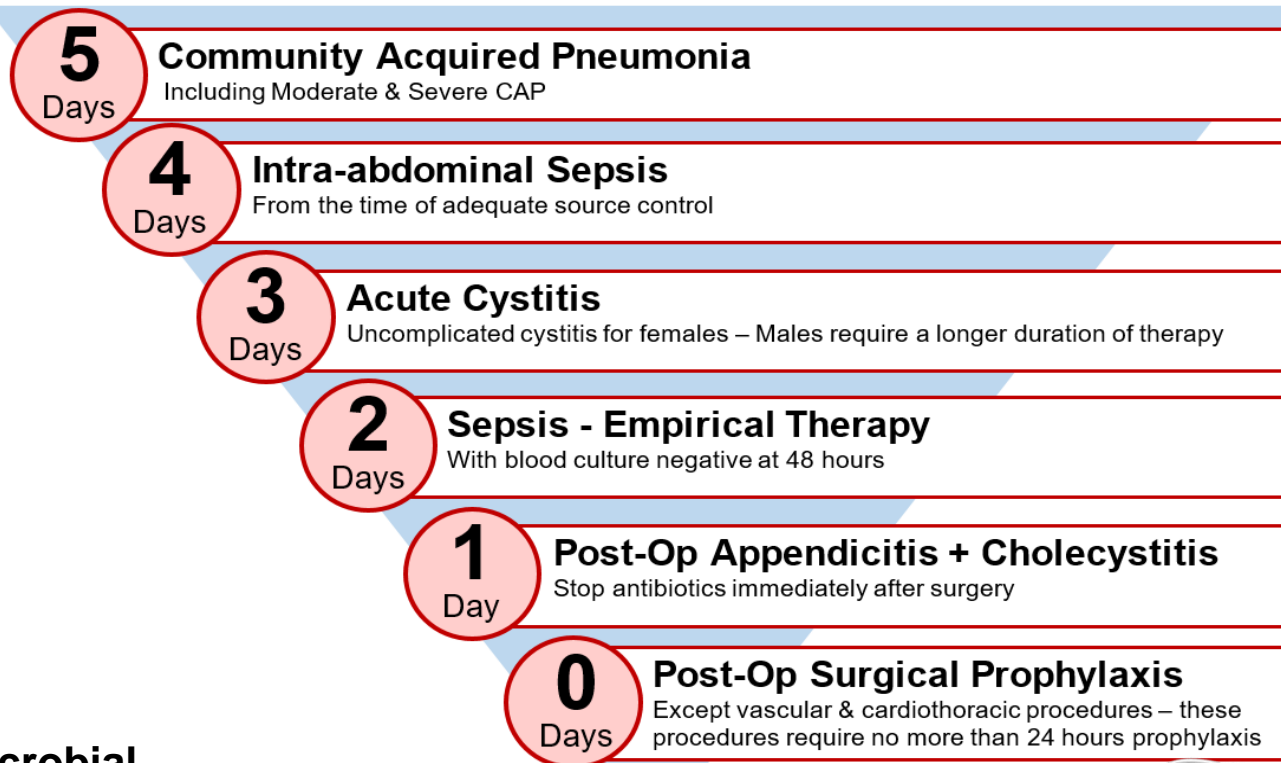
Evidence now supports the use of shorter course antimicrobial therapy for specific indications to eliminate the prolonged and often unnecessary use of antibiotics and their associated adverse events.

Prolonged duration of antimicrobial therapy is associated with an increased risk of adverse effects including;

- *Clostridium difficile* infections
- Candidiasis
- Selection of antibiotic-resistant organisms, increasing the risk of colonisation or infection with a multidrug resistant organism (MDRO).

When reviewing antimicrobial prescriptions and providing antibiotic therapy on discharge;

1. **THINK** about antibiotic duration
2. **PRESCRIBE ONLY** the number of days required to complete the **shortest course**



**NO** routine antibiotics required for:

- Upper Respiratory Tract Infections or Acute Bronchitis
- Uncomplicated Diverticulitis
- Asymptomatic Bacteriuria
- Colonisation (Beware of sputum cultures + skin swabs)



This document was prepared by Kristi Kozierowski (AMS Pharmacist) on behalf of the Infectious Diseases, Microbiology and Pharmacy Departments at John Hunter Hospital. It has been adapted with permission by the Infection Control Service, Communicable Disease Control Branch, SA Health, and endorsed by the South Australian expert Advisory Group on Antimicrobial Resistance (SAAGAR)