

South Australia – Statewide benchmarking report

January 2022 – June 2022

Antibacterial utilisation rates provided in this report are calculated using the number of defined daily doses (DDDs) of the antibacterial class consumed each month per 1,000 occupied bed days.

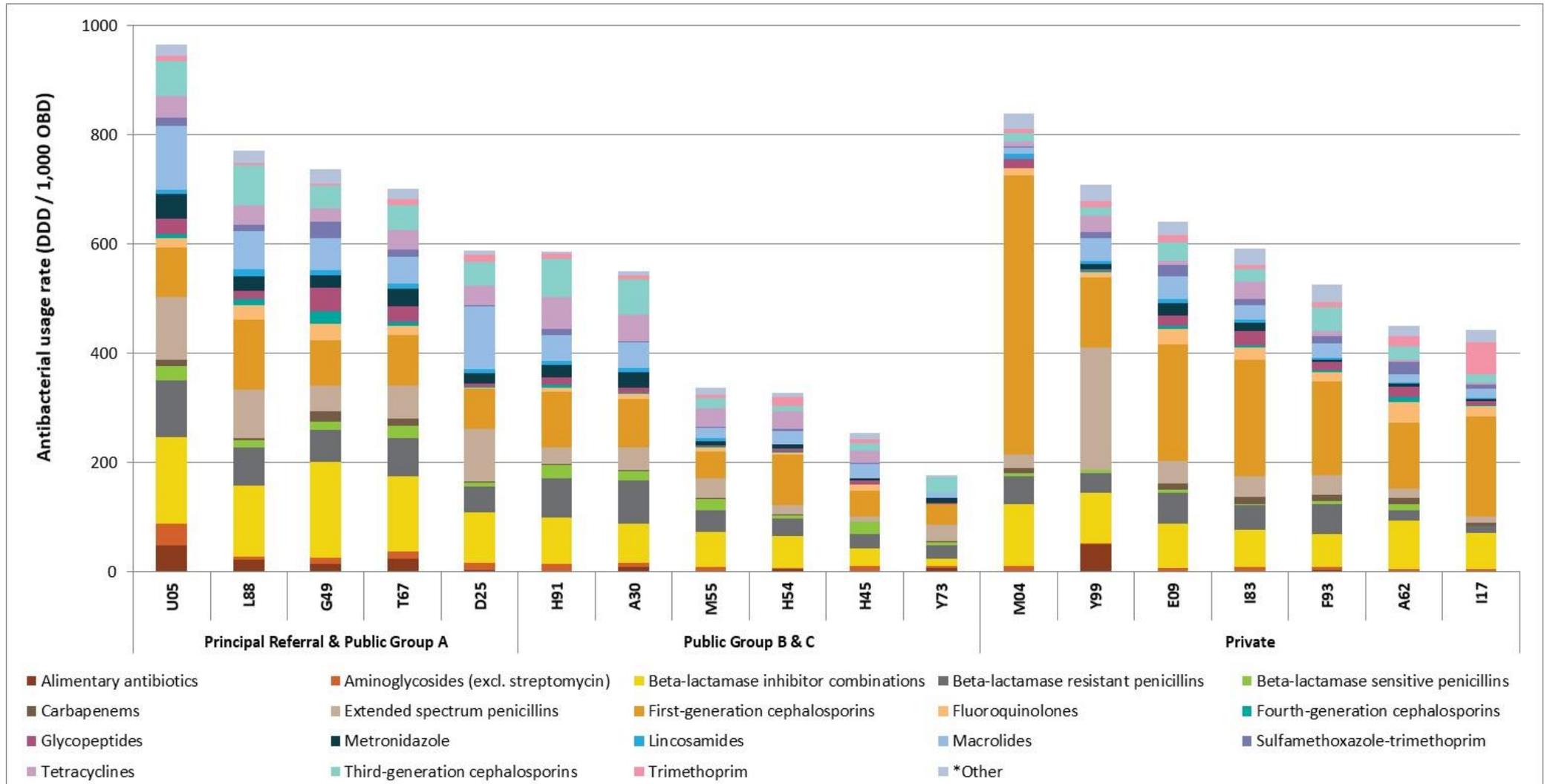
Contributing hospitals are assigned to Australian Institute for Health and Welfare (AIHW) defined peer groups.¹ Contributing hospitals can find their de-identifying code via the NAUSP Portal 'Maintain My Hospital' drop-down menu.

DDD values for each antimicrobial are assigned by the World Health Organization based on the "assumed average maintenance dose per day for the main indication in adults". DDDs are reviewed annually by the WHO as dosing recommendations change over time. For more information refer to: https://www.whocc.no/atc_ddd_methodology/purpose_of_the_atc_ddd_system/

The chart below presents total acute antibacterial usage data for the respective contributing hospitals over the six-month period from 1 January 2022 to 30 June 2022. Unless otherwise specified, the aggregate rates exclude usage in the emergency department and the operating theatre.

¹ AIHW. *Hospital resources 2017-18: Australian hospital statistics*. Available from <https://www.aihw.gov.au/reports/hospitals/hospital-resources-2017-18-ahs/data>

Chart 1: Total acute antibacterial usage rates (DDD/1000 OBD) in NAUSP contributor hospitals, by peer group, South Australia, Jan-Jun 2022 (excludes emergency and operating theatre)



Alimentary antibiotics = rifaximin, fidaxomicin. *Other = amphenicols, monobactams, nitrofurans, linezolid, daptomycin, other cephalosporins, polymyxins, rifamycins, second-generation cephalosporins, steroids, streptogramins and streptomycin.

This report includes data from the following 18 hospitals in SA:

Ashford Hospital
Calvary Adelaide Private Hospital
Calvary Central Districts Hospital
Calvary North Adelaide Hospital
Flinders Medical Centre
Flinders Private Hospital
Gawler Health Service
Lyell McEwin Hospital
Memorial Hospital
Modbury Hospital
Mount Barker District Soldiers Memorial Hospital
Mt Gambier Hospital
Noarlunga Hospital
Port Augusta Hospital
Queen Elizabeth Hospital
Royal Adelaide Hospital
South Coast District Hospital
St Andrew's Hospital

ANTIBACTERIAL CLASSES				
Alimentary antibiotics	fidaxomicin	Lincosamides	clindamycin	
	paromomycin		lincomycin	
Aminoglycosides	rifaximin	Macrolides	azithromycin	
	amikacin		clarithromycin	
	gentamycin		erythromycin	
	neomycin		roxithromycin	
β-lactamase inhibitor combinations	tobramycin	Monobactams	aztreonam	
	amoxicillin - clavulanate		Nitrofuran derivatives	nitrofurantoin
β-lactamase resistant penicillins	piperacillin - tazobactam	Polymyxins	colistin	
	dicloxacillin		polymyxin B	
β-lactamase sensitive penicillins	flucloxacillin	Second-generation cephalosporins	cefaclor	
	benzathine benzylpenicillin		cefamandole	
	benzylpenicillin		cefotetan	
	phenoxymethylpenicillin		cefoxitin	
Carbapenems	procaine benzylpenicillin	Steroid antibacterials	cefuroxime	
	doripenem		fusidic acid	
	ertapenem		Streptogramins	pristinamycin
	imipenem - cilastatin		Streptomycins	streptomycin
	meropenem	Sulfonamide-trimethoprim combinations	sulfamethoxazole - trimethoprim	
Extended-spectrum penicillins	meropenem - vaborbactam	Tetracyclines	doxycycline	
	amoxicillin		minocycline	
	ampicillin		tetracycline	
	pivmecillinam		tigecycline	
First-generation cephalosporins	temocillin	Third-generation cephalosporins	cefixime	
	cefalexin		cefotaxime	
	cefalotin		ceftazidime	
Fluoroquinolones	cefazolin	Trimethoprim	ceftazidime - avibactam	
	ciprofloxacin		ceftriaxone	
	levofloxacin		Other (including other cephalosporins and penems)	ceftaroline fosamil
	moxifloxacin			ceftolozane - tazobactam
norfloxacin	daptomycin			
Fourth-generation cephalosporins	cefepime	Glycopeptides	faropenem	
	cefpirome		fosfomicin	
Imidazole derivatives	metronidazole	Intermediate-acting sulfonamides	linezolid	
			dalbavancin	rifampicin
			oritavancin	tedizolid
			teicoplanin	
Intermediate-acting sulfonamides	sulfadiazine			

Disclaimer: Data presented in this report were correct at the time of publication. As additional hospitals join NAUSP, retrospective data are included. Data may change when quality assurance processes identify the need for data updates.

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