

Tasmania

Statewide benchmarking report – Emergency Department

July 2023 – December 2023

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 Emergency Department presentations.

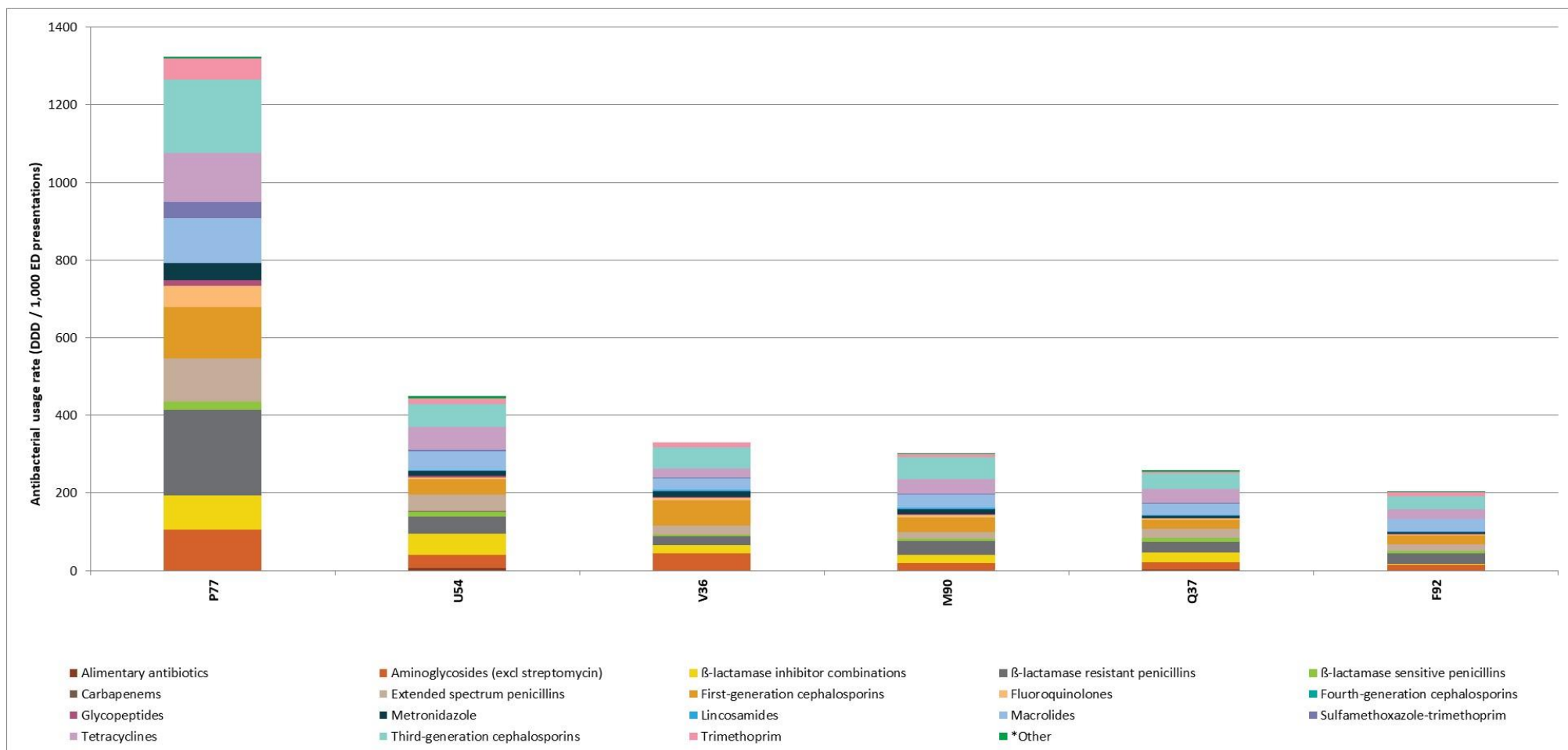
Contributing hospitals are assigned according to Australian Institute for health and Welfare (AIHW) defined peer groups.¹ Deidentified contributor codes can be located via the ‘Maintain My Hospital’ drop-down menu in the NAUSP Portal.

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 charts below present aggregated antibacterial usage data in the Emergency Department for the respective contributing hospitals over the six-month period from 1 July 2023 to 31 December 2023. The same data are presented in both charts with outlier hospital(s) removed from Chart 1b.

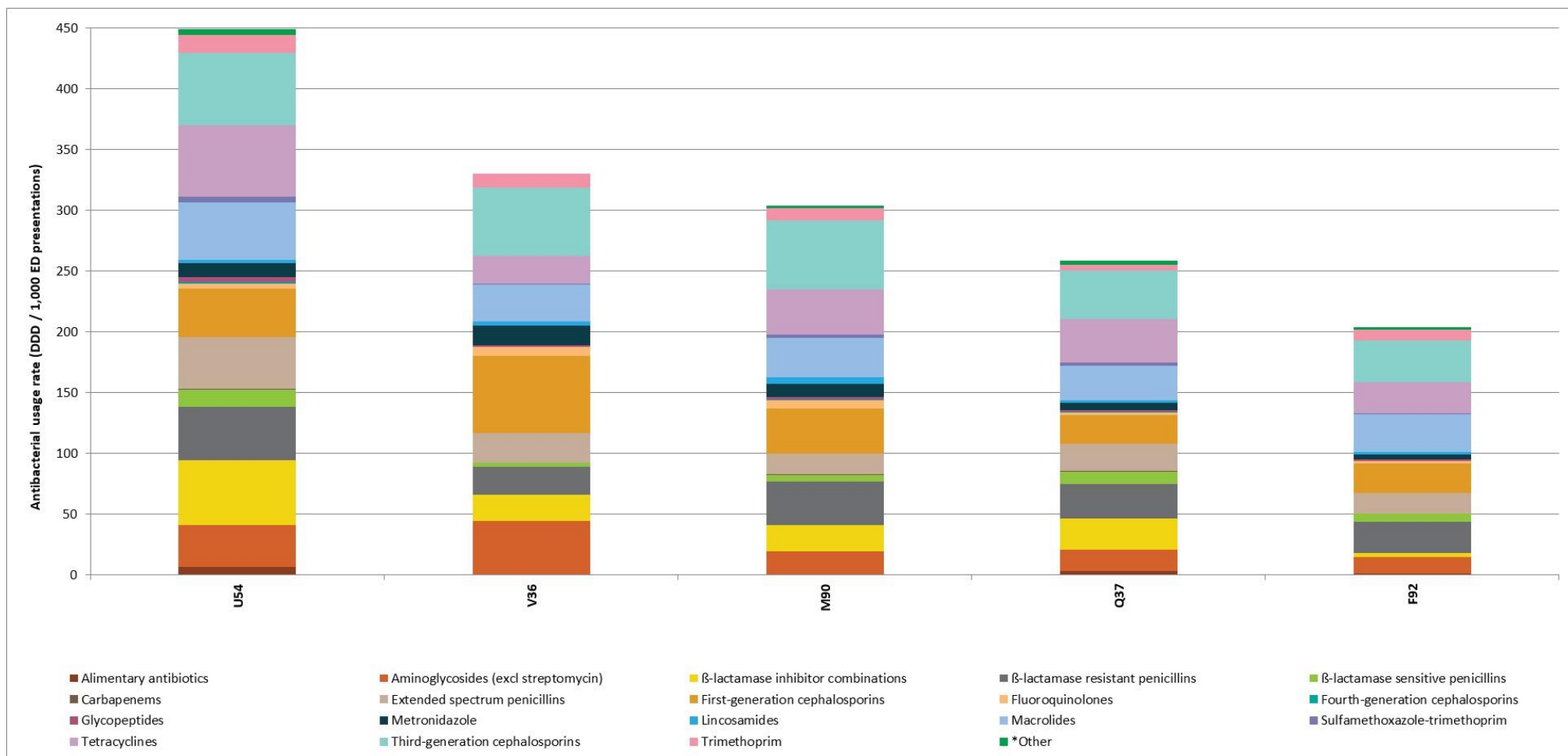
¹ AIHW. *Hospital resources 2017-18: Australian hospital statistics*. Available from <https://www.aihw.gov.au/reports/hospitals/hospital-resources-2017-18-ahs/data>

Chart 1a: Emergency Department antibacterial usage rates (DDD/1000 emergency presentations) in NAUSP contributor hospitals, by peer group, Tasmania, July – December 2023



[Alimentary antibiotics = rifaximin, fidaxomicin, paromomycin. Other = amphenicols, antimycotics, combinations for eradication of Helicobacter pylori, monobactams, nitrofurans, linezolid, daptomycin, other cephalosporins, polymyxins, rifamycins, second-generation cephalosporins, steroids, streptogramins and streptomycin.

Chart 1b: Emergency Department antibacterial usage rates (DDD/1000 emergency presentations) in NAUSP contributor hospitals*, by peer group, Tasmania, July – December 2023



[Alimentary antibiotics = rifaximin, fidaxomicin, paromomycin. Other = amphenicols, antimycotics, combinations for eradication of Helicobacter pylori, monobactams, nitrofurans, linezolid, daptomycin, other cephalosporins, polymyxins, rifamycins, second-generation cephalosporins, steroids, streptogramins and streptomycin.

***Note: Outlier hospital removed (Hospital P77)**

This report includes data from the following 6 hospitals in TAS:

Calvary Lenah Valley Hospital
Launceston General Hospital
Hobart Private Hospital
North West Regional Hospital
Royal Hobart Hospital
Mersey Community Hospital

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.

The National Antimicrobial Utilisation Surveillance Program (NAUSP) is funded by the Commonwealth Department of Health and Aged Care (DOHAC). NAUSP is administered by Antimicrobial Programs, Communicable Disease Control Branch, Department for Health and Wellbeing, Government of South Australia. All individual hospital data contributed to this program will remain de-identified unless otherwise agreed in writing. Aggregated data may be provided to all contributors, the ACSQHC and DOHAC.

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		Nitrofurans 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	
meropenem - vaborbactam	Tetracyclines		doxycycline	
Extended-spectrum penicillins	amoxicillin	Third-generation cephalosporins	minocycline	
	ampicillin		tetracycline	
	pivmecillinam		tigecycline	
	temocillin		cefixime	
First-generation cephalosporins	cefalexin	Trimethoprim	cefotaxime	
	cefalotin		ceftazidime	
Fluoroquinolones	cefazolin		Other (including other cephalosporins and penems)	ceftazidime - avibactam
	ciprofloxacin			ceftriaxone
	levofloxacin	ceftaroline fosamil		
	moxifloxacin	ceftolozane - tazobactam		
Fourth-generation cephalosporins	norfloxacin	Other (including other cephalosporins and penems)	daptomycin	
	cefepime		faropenem	
Glycopeptides	ceftazidime		fosfomycin	
	cefpirome		linezolid	
	dalbavancin	rifampicin		
	oritavancin	tedizolid		
Imidazole derivatives	teicoplanin	Intermediate-acting sulfonamides		
	vancomycin			
Intermediate-acting sulfonamides	metronidazole			
	sulfadiazine			