

South Australia – Statewide benchmarking report

Emergency Department

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 Emergency Department presentations.

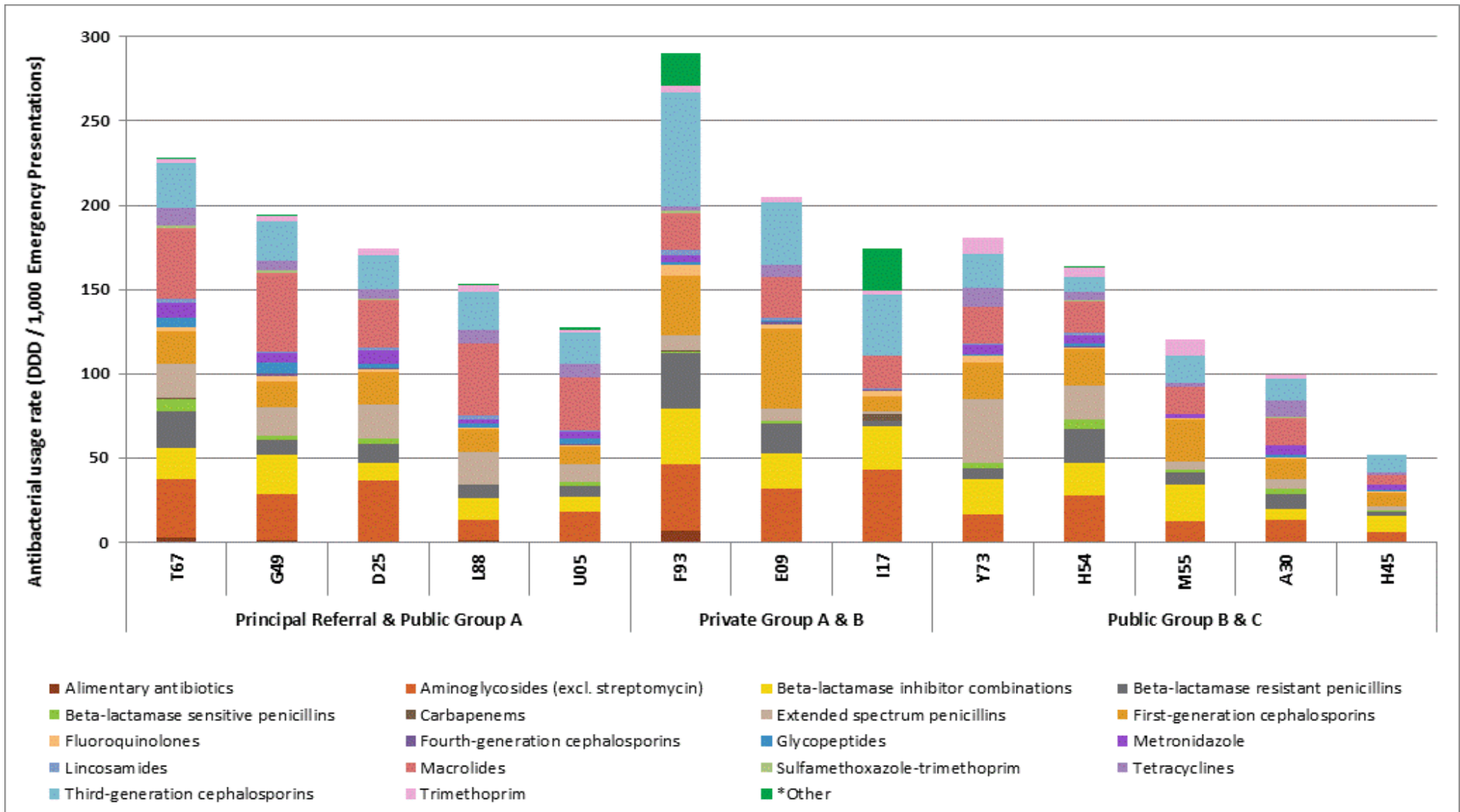
Contributing hospitals are assigned according to Australian Institute for health and Welfare (AIHW) defined peer groups.¹ Deidentified contributor codes can be located via the 'Maintain My Hospital' drop-down menu in the NAUSP Portal.

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.whooc.no/atc_ddd_methodology/purpose_of_the_atc_ddd_system/

The chart below presents aggregated antibacterial usage data in the Emergency Department for the respective contributing hospitals over the six-month period from 1 January 2022 to 30 June 2022. [Note: Not all NAUSP contributors are able to provide stratified data for the Emergency Department].

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: Emergency Department antibacterial usage rates (DDD/1000 emergency presentations) in NAUSP contributor hospitals, by peer group, South Australia, Jan – Jun 2022



[Alimentary antibiotics = rifaximin, fidaxomicin, paromomycin. Other = amphenicols, antimycobacterial antibiotics, monobactams, nitrofurans, linezolid, daptomycin, other cephalosporins and penems, polymyxins, second-generation cephalosporins, steroids, streptogramins and streptomycin]

This report includes data from the following 13 hospitals in SA:

Ashford Hospital

Calvary Adelaide Private Hospital

Flinders Medical Centre

Gawler Health Service

Lyell McEwin Hospital

Modbury Hospital

Mount Barker District Soldiers Memorial

Mt Gambier Hospital

Noarlunga 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		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
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	
	ceftazidime		fosfomicin	
Imidazole derivatives	metronidazole	Intermediate-acting sulfonamides	linezolid	
	metronidazole		rifampicin	
	metronidazole		tedizolid	
	metronidazole			
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.