

# New recommendations to stop antibiotics sooner

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The systematic review into the duration of intravenous antibiotics for children with bacterial infections, and when it is safe and appropriate to change to oral antibiotics has developed recommendations that will help doctors to make more informed assessments around the best timing of when to make the switch.

The study published today in the *Lancet Infectious Diseases* looked at 36 bacterial infections in children representing the vast majority of infections needing antibiotics. Antibiotic resistance is a global crisis and proper use of antibiotics is critical. The study found that many traditional courses are too long, which keeps children in hospital unnecessarily and can lead to resistance.

The study resulted in an accompanying guideline that is being launched nationally today to coincide with the publication: Guidelines for Antibiotic Duration and IV-Oral Switch in Children.

The lead authors of the [systematic review](#) and accompanying national guidelines were Dr Brendan McMullan from University of NSW (UNSW) and A/Professor Penelope Bryant from Murdoch Childrens Research Institute (MCRI). It has been written on behalf of the Australian and New Zealand Paediatric Infectious Diseases - Australasian Stewardship of Antimicrobials in Paediatrics (ANZPID-ASAP) group.

Senior author A/Professor Bryant who is chair of the group, said the

study has helped to form national guidelines around the duration of IV and oral antibiotics for children with bacterial infections.

"Antibiotics are prescribed for most children. We have provided practical and evidence-based advice on when doctors can shorten courses of antibiotics to help in the fight against resistance," she said.

The review showed that criteria for the switch to oral antibiotics can include a reduction in fever and clinical improvement with or without supporting test results. Evidence suggests that IV-oral switch can occur earlier than previously recommended for some infections.

Dr McMullan said, "Antibiotic resistance is a growing problem in Australia and worldwide. We need to start using antibiotics better right now, and this study is about using the evidence to promote smarter antibiotic prescribing for [children](#)."

The president of the Australasian Society for Infectious Diseases (ASID) Professor Cheryl Jones said "These are a highly valuable series of evidence-based recommendations to guide when and how to step down from intravenous to [oral antibiotics](#) in childhood infections."

The impact of the review on patient management globally also is anticipated. "The opportunity to have these evidence-based recommendations in one location will be tremendously helpful," said Professor David W. Kimberlin, immediate past president of the Pediatric Infectious Diseases Society (PIDS), which is ASID's North American counterpart. "They likely will lead to management changes well beyond Australia."

**More information:** Brendan J McMullan et al. Antibiotic duration and timing of the switch from intravenous to oral route for bacterial infections in children: systematic review and guidelines, *The Lancet*

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