

Journal Watch

Antimicrobial Use Among Patients Receiving Palliative Care Consultation

Presented by: Evgheni Plohotniuc R2; November 4, 2010

Reference: Erin Diviney Chun, Phillip E. Rodgers, Caroline A. Vitale, Curtis D. Collins and Preeti N. Malani, *AM J HOSP PALLIAT CARE* 2010 27: 261

Abstract:

Background: We sought to characterize antimicrobial use among patients receiving palliative care consultation.

Methods: Retrospective review of patients seen by the Palliative Care Service at the University of Michigan Health System from January 2008 to May 2008. Results: Of 131 patients seen in consultation, 70 received antimicrobials. We identified 92 infections among these 70 patients; therapy for 54 (58.7%) was empiric. Empiric therapy was most commonly prescribed for respiratory infection and urinary tract infection. Piperacillin/tazobactam (P/T) was the most frequently used agent, with 26 patients receiving P/T (37.1%); 22 of 26 received this agent empirically (84.6%, $P = .005$). Vancomycin was prescribed to 23 patients (32.9%). Sixteen patients (22.9%) died in hospital; another 31 were enrolled in hospice care.

Conclusions: Our results suggest significant use of empiric, broad-spectrum antimicrobial therapy among hospitalized patients near the end of life. We advocate for careful assessment of potential benefits and treatment burdens of antimicrobial therapy, especially when palliation is the goal.

Strengths:

The current study is unique in its aim to describe antimicrobial use among hospitalized patients seen in consultation by a palliative care team. Well performed statistical calculations and data analysis.

Weaknesses:

The current study is limited by its retrospective design. The sample was heterogenic with regard to diagnose. There was an inability to associate antimicrobials with either improved or adverse outcomes in this sample. There were no included information whether or not a patient (or family members who represent his wishes) with decision-making capacity to make decisions about treatment according to his or her beliefs, cultural and personal values made a decision regarding administration of antibiotics.

Relevance to Palliative Care:

There are guidelines available to select antibiotics for specific infection. But there are no clear guidelines on the use of antibiotics in palliative care patients. This study provides additional information of the frequent use of broad-spectrum antimicrobials in an inpatient population with complex medical conditions near the end of life. Prospective investigations characterizing antimicrobial use among palliative care patients at the end of life would be helpful. Information as to whether or not this treatment was provided respecting patient's and families' wishes would also be helpful.