

CONSUMPTION OF ANTIBIOTICS IN PUBLIC ACUTE HOSPITALS IN IRELAND 2009 DATA

MAIN POINTS

- Inpatient antibiotics consumption figures for 2009 from 42 public acute hospitals are shown
- There was a 3% drop in the median usage rate from 77.42 Defined Daily Doses per 100 Bed-Days Used (DDD/100BDU) for the updated 2008 figure to 75.18 DDD/100BDU in 2009
- There was a small drop in the proportion of a specific set of antibiotics in injectable form (those that could be easily switched to oral form) by 1.3 percentage points to 8.1%
- The decreases were seen in all categories of hospitals
- As in 2008, usage of penicillins with beta-lactamase inhibitor has continued to increase while fluoroquinolone usage has greatly decreased. Both of these groups of antibiotics are commonly used broad-spectrum agents targeted for reduction strategies in hospitals

As part of the HSE strategy for prevention and control of healthcare-associated infection (HCAI), launched in March 2007, the Health Protection Surveillance Centre (HPSC) was asked to coordinate the publication of data relating to antimicrobial consumption for acute public hospitals in Ireland. The first report was produced in 2007 providing the initial baseline publication of these data.

The primary value of this dataset is to the individual data providers, allowing individual hospitals to monitor trends over time, assess the impact of antibiotic stewardship programmes, and identify targets for future interventions and resource requirements. The data included in this report do not allow direct comparison of results between individual hospitals.

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SECTION A. METHODS AND LIMITATIONS

Using a protocol developed in conjunction with clinical pharmacists, quarterly antimicrobial data for 2009 were extracted from appropriate hospital computer systems that record data on dispensed drugs. At the HPSC, the data from individual hospitals were converted to standardised units of doses. Only consumption relating inpatients were taken further for rate calculation.

In this report the Anatomical Therapeutic Chemical (ATC) index (www.whocc.no/atcddd) is used to classify all drugs used in human medicine into a hierarchical system with five levels. All systemic antimicrobial drugs at level one are divided into antibiotics, antifungals, antivirals, etc at the second level. The drugs are divided into their major classes and therapeutic subgroups at levels three and four, while the fifth level (ATC5) is the chemical substance. Each drug at ATC5 in conjunction with the route of administration (oral or intravenous) is given a defined daily dose (DDD), which is the assumed average maintenance dose per day for a drug used for its main indication in adults.

The main limitation for the ATC-DDD system is that the quantities refer to adult patients. There are many hospitals in the sample that provide maternity services and/or paediatric care, therefore there is an inherent bias in the system. A further limitation with the ATC-DDD system is that the measure is for the main indication only but a single drug can be used to treat several different conditions. Additionally, as well as the case-mix, guidelines for the optimal dosage regimen of an antibiotic within the same hospital may change over time.

The denominator data were obtained from the Performance Monitoring Unit (PMU) of the HSE National Hospitals Office. Rates are calculated by taking the total (inpatient) DDD per hospital and dividing by the total number of bed-days used (BDU) for the hospital. This is multiplied by 100 to obtain the rate in DDD per 100 BDU.

The HPSC provided each hospital with a detailed report, as advised by the Irish Antimicrobial Pharmacists Group.

Measures Presented in Table 1

1. Total acute inpatient antibiotic consumption in Defined Daily Doses per 100 Bed-Days Used (DDD/100BDU) for each hospital is presented for 2008 and 2009. Acute inpatient means that data on antibiotics dispensed to outpatients, day cases and external facilities are excluded
2. The following antimicrobial agents have good oral bioavailability and therefore, for many patients, it may be possible to switch from intravenous (IV) to oral use or initiate treatment orally: *ciprofloxacin*, *levofloxacin*, *moxifloxacin*, *linezolid*, *fusidic acid*, *clindamycin*, *metronidazole*, *erythromycin*, *clarithromycin* and *rifampicin*. In Table 1, the proportion of the volume used in DDD of these specific agents in IV form over total antibiotic use in DDD expressed as percentage for each hospital is presented for 2008 and 2009

Note that figures for previous years have been updated and may vary from previously published data

Acute hospital pharmacies that lack any information technology system are unable to provide data

SECTION B. TOTAL CONSUMPTION BY INDIVIDUAL HOSPITAL (MAIN TABLE)

Table 1. Antibiotic consumption data for 42 public acute hospitals for 2009 presented with updated figures for 2008. See methods for details of the measures.

Acute Public Hospital	2008		2009	
	Acute Inpatient Antibiotic Consumption Rate (DDD per 100 bed-days used)	Proportion of Specific IV antibiotics	Acute Inpatient Antibiotic Consumption Rate (DDD per 100 bed-days used)	Proportion of Specific IV antibiotics
Adelaide & Meath & National Children's Hospital, Tallaght	86.9	12.6%	96.7	12.5%
Bantry General Hospital	*	*	*	*
Beaumont Hospital	73.0	12.2%	72.1	6.7%
Cappagh National Orthopaedic Hospital, Dublin	67.4	4.8%	57.9	1.4%
Cavan General Hospital	85.8	7.4%	80.6	6.5%
Children's University Hospital, Temple Street	78.6	7.8%	77.0	9.9%
Connolly Hospital, Blanchardstown	87.4	10.5%	73.7	10.6%
Coombe Women's Hospital	22.2	7.5%	25.9	8.0%
Cork University Hospital	62.5	8.3%	63.5	7.7%
Galway University Hospitals	103.9	8.5%	95.5	8.1%
Kerry General Hospital, Tralee	58.4	12.4%	63.7	11.7%
Letterkenny General Hospital	75.7	10.4%	79.0	8.3%
Lourdes Orthopaedic Hospital, Kilcreene, Kilkenny	*	*	*	*
Louth County Hospital, Dundalk	77.8	9.0%	90.0	7.5%
Mallow General Hospital ¹	*	*	75.7	16.3%
Mater Misericordiae University Hospital	96.6	11.4%	77.8	11.1%
Mayo General Hospital, Castlebar	102.2	5.9%	102.9	4.4%
Mercy University Hospital, Cork	81.8	7.3%	91.6	7.3%
Midland Regional Hospital Mullingar ²	72.2	12.7%	74.4	14.6%
Midland Regional Hospital Portlaoise	*	*	*	*
Midland Regional Hospital Tullamore	91.8	7.7%	71.6	7.1%
Mid-Western Regional Hospital Ennis	94.3	12.5%	81.6	10.6%
Mid-Western Regional Hospital Nenagh	71.4	12.4%	84.8	10.1%
Mid-Western Regional Hospital, Dooradoyle, Limerick	72.0	10.1%	72.9	11.3%
Monaghan General Hospital ³	87.1	10.6%	79.7	8.6%
Naas General Hospital	40.9	12.4%	44.2	12.6%
National Maternity Hospital, Holles Street	17.3	4.8%	20.1	3.8%
Our Lady of Lourdes Hospital, Drogheda	77.0	12.4%	77.5	12.6%
Our Lady's Hospital for Sick Children, Crumlin	74.1	6.9%	73.9	7.5%
Our Lady's Hospital, Navan	94.3	10.0%	87.3	9.4%
Portiuncula Hospital, Ballinasloe	68.4	10.6%	73.3	8.0%
Roscommon County Hospital	114.1	6.0%	100.9	5.9%
Rotunda Hospital	28.0	7.7%	27.9	6.7%
Royal Victoria Eye & Ear Hospital, Dublin	56.1	12.9%	74.7	18.0%
Sligo General Hospital ²	78.5	9.9%	63.3	8.5%
South Infirmary - Victoria University Hospital, Cork ²	71.2	4.9%	69.7	5.5%
South Tipperary General Hospital, Clonmel	83.1	7.9%	80.9	8.1%
St Columcille's Hospital, Loughlinstown	81.7	10.2%	82.8	7.6%
St James's Hospital	73.9	10.6%	71.8	9.7%
St John's Hospital, Limerick	87.8	11.6%	93.5	8.7%
St Luke's General Hospital, Kilkenny	69.8	6.9%	68.9	6.0%
St Luke's Hospital, Dublin	34.2	7.3%	26.9	3.7%
St Mary's Orthopaedic Hospital, Gurranebraher, Cork	*	*	*	*
St Michael's Hospital, Dun Laoghaire	80.7	5.3%	*	*
St Vincent's University Hospital	117.4	11.4%	113.0	11.0%
Waterford Regional Hospital	79.0	5.8%	81.8	8.2%
Wexford General Hospital	70.4	5.6%	73.9	5.5%

* Data not available

¹ Data collection began in Q1 of 2009

² Only Q1 & Q2 2009 data received

³ To end of 2009 Q2 only

SECTION C. BREAKDOWN BY HOSPITAL CATEGORY

Graph 1. Box plot of antibiotic consumption in DDD per 100 BDU for public acute hospitals by hospital category, for 2007 to 2009. See end of page 5 for explanation of the plot.

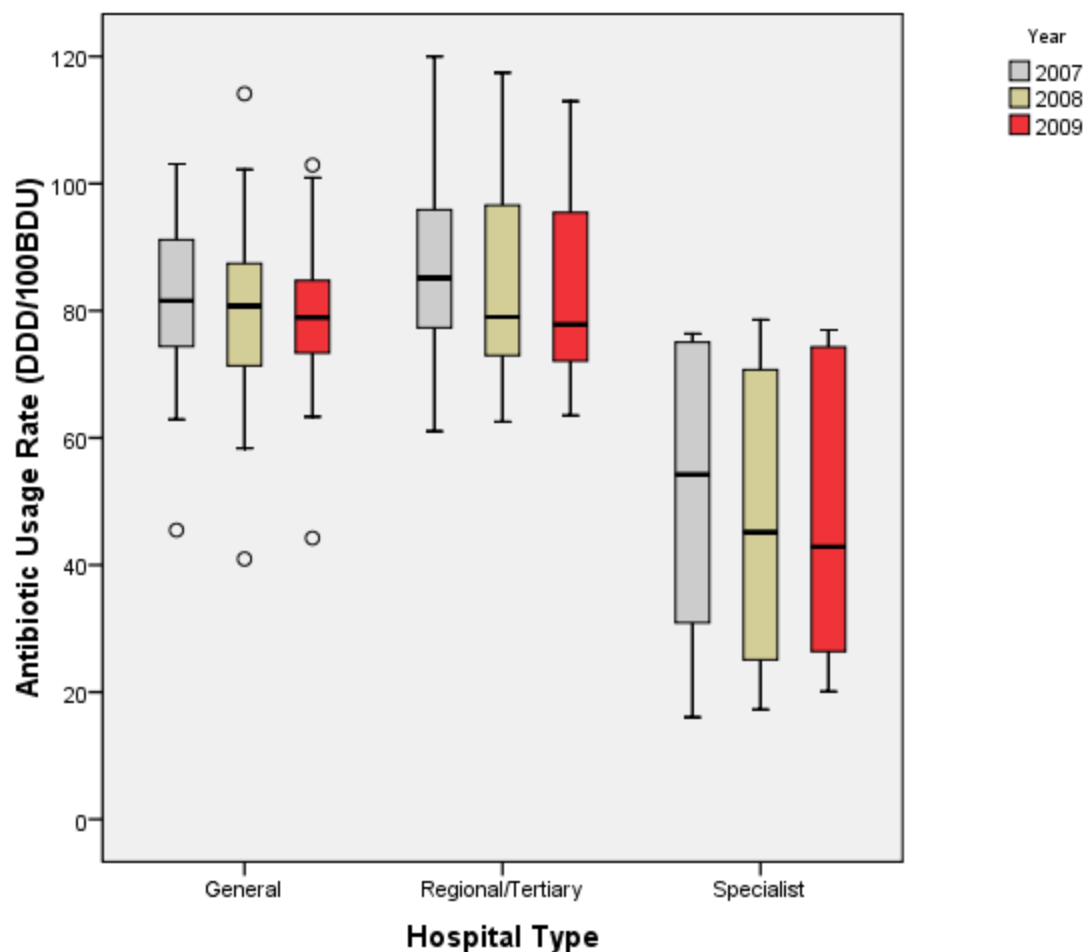


Table 2. Median antibiotic consumption in DDD per 100 BDU for public acute hospitals by hospital category, for 2007 to 2009.

Hospital Category	2007		2008		2009	
	Rate (DDD / 100 BDU)	Number of Hospitals	Rate (DDD / 100 BDU)	Number of Hospitals	Rate (DDD / 100 BDU)	Number of Hospitals
General	81.57	21	80.73	25	78.95	25
Regional/Tertiary	85.14	8	79.00	9	77.84	9
Specialist	54.24	7	45.14	8	42.87	8
All Hospital	79.08	36	77.42	42	75.18	42

Graph 2. Box plot of proportion of specific agents in intravenous form over total (%) for public acute hospitals by hospital category, for 2007 to 2009. Please see methods section for list of specific agents and see end of this page for explanation of the plot.

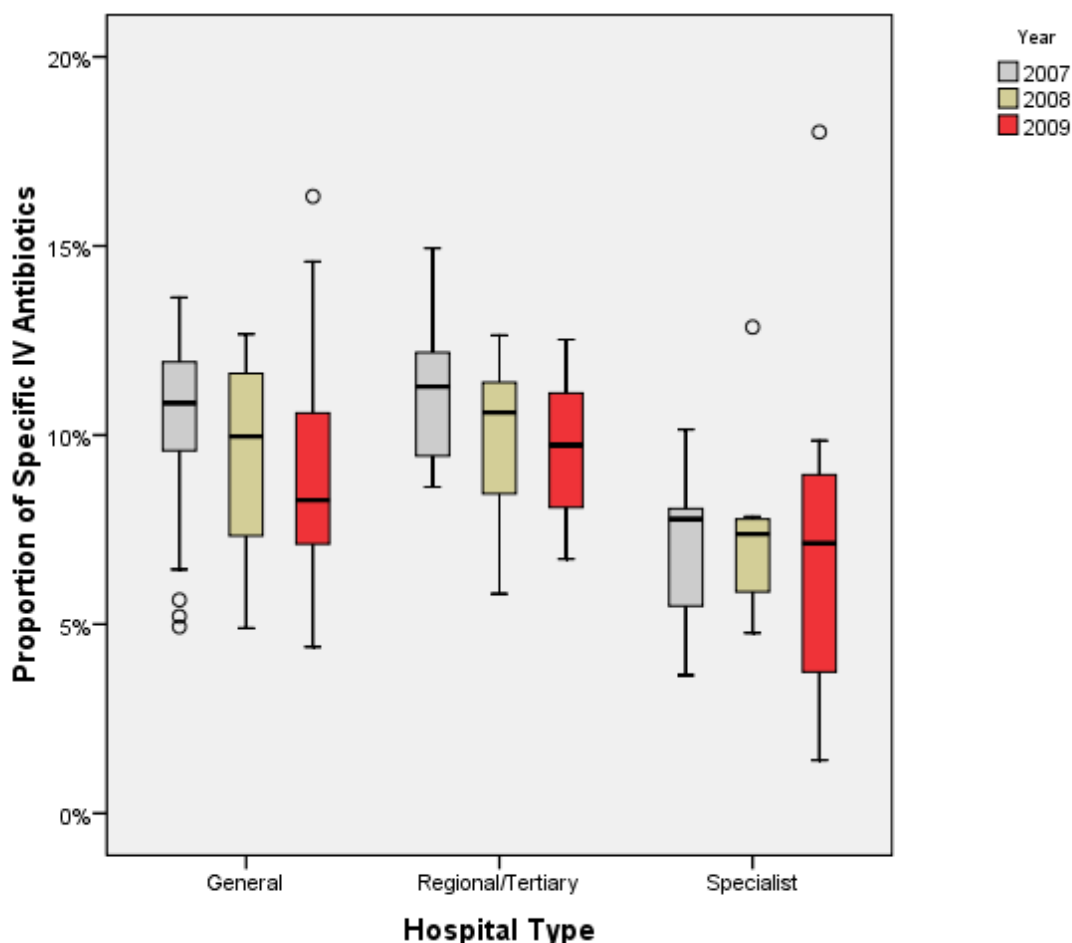


Table 3. Median of proportion of specific agents in intravenous form over total (%) for public acute hospitals by hospital category, for 2007 and 2008. Please see methods section for list of specific agents.

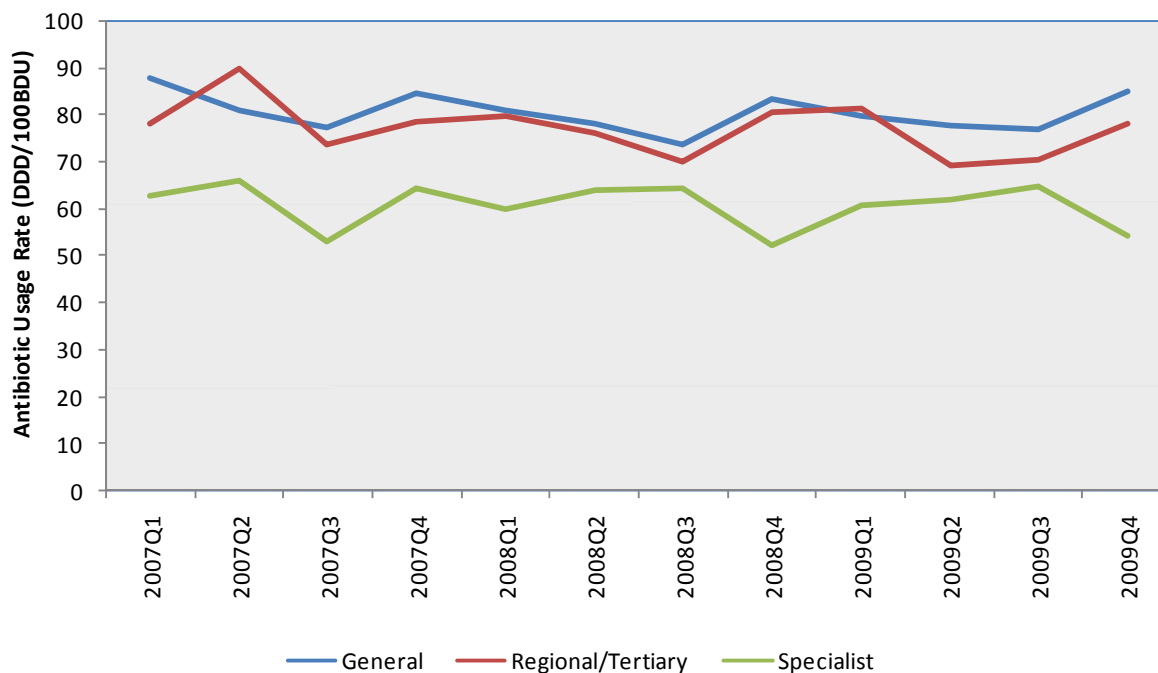
Hospital Category	2007		2008		2009	
	Proportion of Specific Agents in IV Form	Number of Hospitals	Proportion of Specific Agents in IV Form	Number of Hospitals	Proportion of Specific Agents in IV Form	Number of Hospitals
General	10.8%	21	10.0%	25	8.3%	25
Regional/Tertiary	11.3%	8	10.6%	9	9.7%	9
Specialist	7.8%	7	7.4%	8	7.1%	8
All Hospital	10.3%	36	9.4%	42	8.1%	42

Explanation of the box (or **box-and-whiskers**) plot: the bottom and top of the box are the 25th and 75th percentile (the lower and upper quartiles, respectively, so the box represents the inter-quartile range or IQR). The band near the middle of the box is the 50th percentile or the median. The ends of the whiskers represent the lowest data point still within 1.5 times the IQR of the lower quartile, and the highest data point still within 1.5 times the IQR of the upper quartile. Any data point not included between the whiskers is plotted as an outlier with a circle. Box plots are used to display differences between populations or categories without making any assumptions of the underlying statistical distribution. They help to indicate the degree of dispersion (spread) and skewness in the data, and identify outliers.

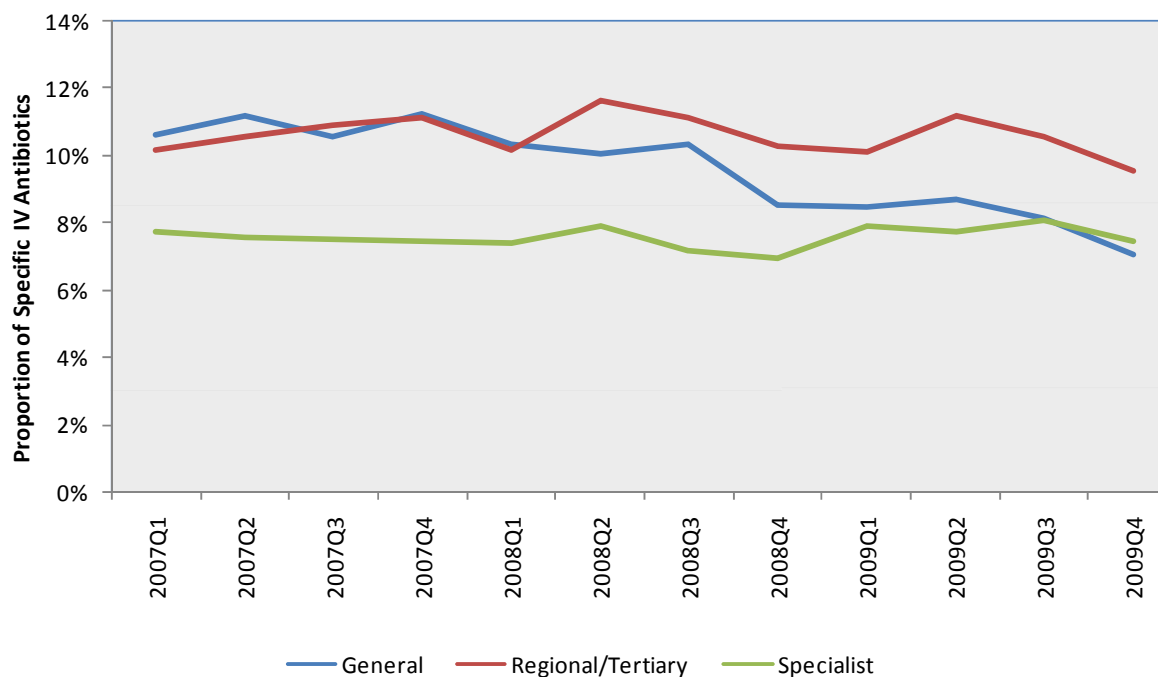
SECTION D. QUARTERLY TRENDS

Median quarterly trends by hospital category are presented for 28 hospitals that provided quarterly data for all quarters of 2007 to 2009.

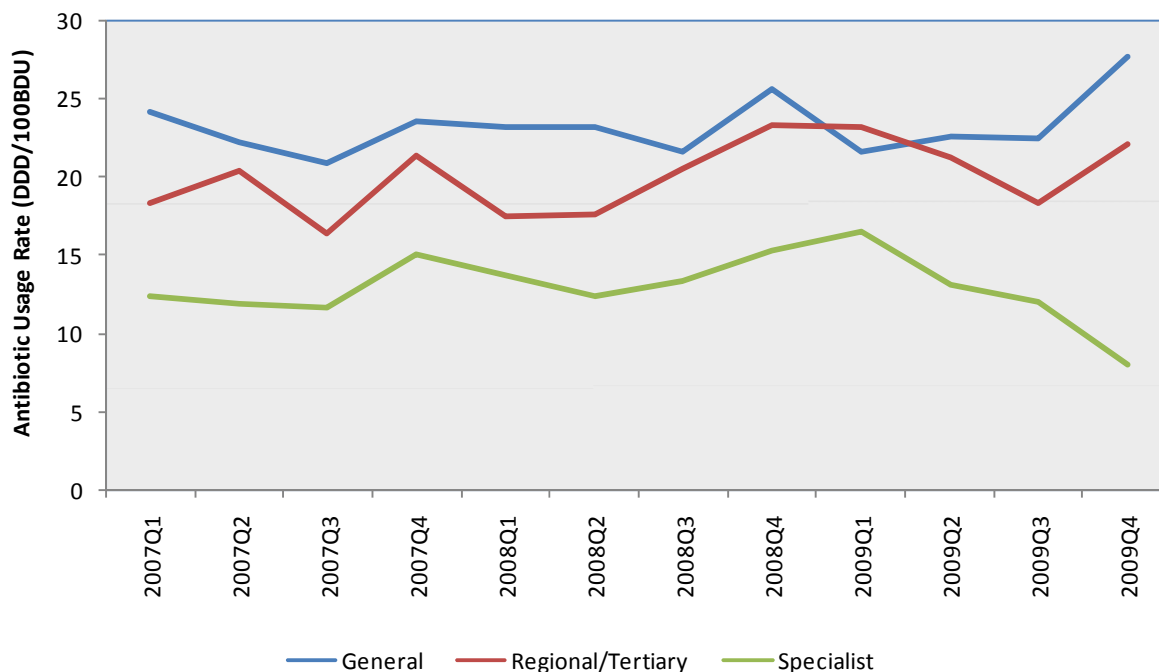
Graph 3. Changes in **total** antibiotic consumption in DDD/100 BDU by hospital category.



Graph 4. Changes in proportion of **specific intravenous agents over total** antibiotic consumption by hospital category. Please see methods section for list of specific agents.



Graph 5. Changes in **penicillins with beta-lactamase inhibitor (e.g. co-amoxiclav)** antibiotic consumption in DDD/100 BDU by hospital category.



Graph 6. Changes in **fluoroquinolone** antibiotic consumption in DDD/100 BDU by hospital category.

