

#576 Implementation of an evidence based antibiotic prophylaxis guideline: Experience in a reference center of Latin America.

Julian Azuero¹, Luz Maryuri Ruiz¹, Valentina García¹, Sebastian Peña¹, Cesar Diaz¹, Mauricio Plata¹
1. Urology Department – Fundación Santa Fe de Bogotá.

AIMS OF STUDY

Manipulation of the lower urinary tract, particularly during urodynamic study, has been linked as a significant risk factor for UTI, yet there is no universal consensus on antibiotic prophylaxis. To address this issue, our institution has developed a protocol for antimicrobial prophylaxis in urodynamic studies, but its true impact remains unclear.

The aim of this study is to evaluate the outcome of specific antimicrobial prophylaxis in patients undergoing urodynamic study.

RESULTS

A reduction on UTI rates was seen with the adjusted prophylactic strategy

The advantage of this strategy is that many patients do not require antibiotic prophylaxis

This results merit the consideration of a potential shift towards standardized antimicrobial prophylaxis

STUDY DESIGN, MATERIALS AND METHODS

We conducted retrospective observational study in a cohort of patients who underwent urodynamics and videourodynamics from January 2022 to December 2023 in our institution. 1st year: patients received a standardized dosage of norfloxacin were determine by the urologist preferences, this primarily were older men with high post void residuals. 2nd year: 1 gram cephalexin is given to patients under certain conditions.

PROPHYLAXIS CANDIDATES

- 70 years of age or older
 - Neurogenic patients
 - Lower urinary tract obstruction
 - Postvoid residual greater than 100ml
 - Immunodeficiency
 - Permanent urinary catheter
 - Asymptomatic bacteriuria
- **Total Patients Included:** 2,740
 - **Enrollment by Year:** 1,300 enrolled in 2022, and 1,440 enrolled in 2023.
 - **Mean Age:** 62 years **Gender Distribution:** 72.4% men.27.6% women.
 - 9 UTIs post-urodynamic studies.
 - 7 UTIs in 2022 (0.005% of cases).
 - 2 UTIs in 2023 (0.0013% of cases).
 - Most complications were febrile episodes that resolved within 24 hours of cephalosporin management.
 - **Main Pathogens Identified:** Escherichia coli and Klebsiella spp.
 - **Common Comorbidities:** High blood pressure, Hypothyroidism and Coronary artery disease.

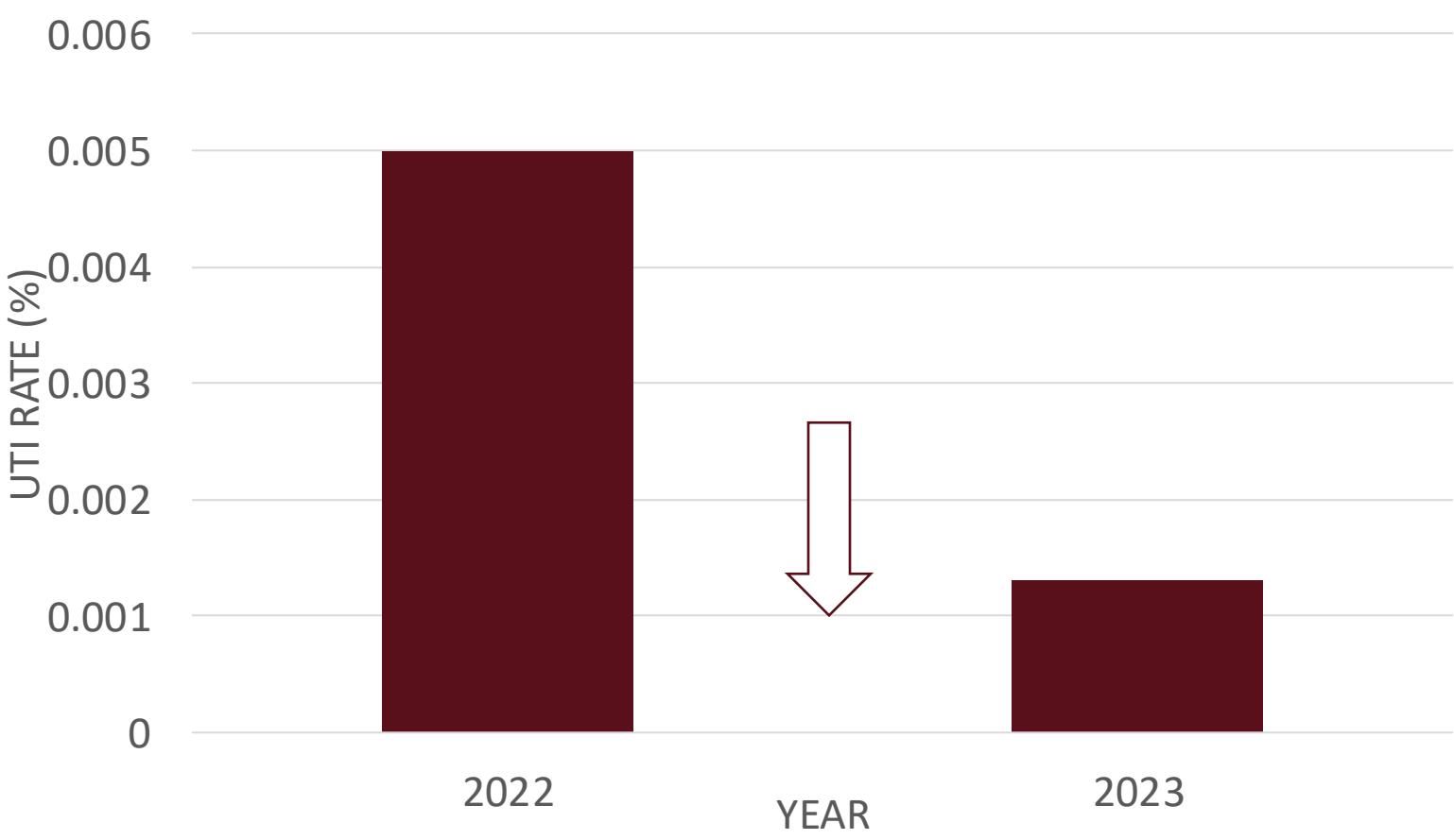


Table 1. Comparison of urinary infection rates following the establishment of an antibiotic prophylaxis protocol.

CONCLUDING MESSAGE

The application of a specific antibiotic prophylaxis protocol prior to urodynamic study, results in the non-use of antibiotics in a large proportion of patients

Further studies are needed to propose a worldwide consensus for the use of antibiotic prophylaxis prior to urodynamic study while minimizing unnecessary antimicrobial use

References

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