

Antimicrobial stewardship programmes in Emilia-Romagna, Italy

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The purpose of this study was to evaluate the state-of-the-art of antimicrobial stewardship programmes (ASPs) in Emilia-Romagna, Italy. A self-compiled, 23-question, multiple-choice questionnaire, divided into eight sections, focusing on Public Health Trust (PHT) characteristics, multidisciplinary team, formulary restrictions, education, guidelines and protocols, auditing, antimicrobial therapy management and consumption, and resistance surveillance, was sent to all 17 PHTs of Emilia-Romagna. The 'composite index of good antibiotic use' (ICATB) score, a French ASP process index based upon 12 different parameters, was calculated. All PHTs completed the survey. All PHTs had an antimicrobial control programme, although an antimicrobial stewardship team was present in 11/17 (65%) of trusts. The main results were (a) active antimicrobial committee, 47% of PHTs; (b) restricted formularies, 100%; (c) courses on surgical antimicrobial prophylaxis (SAP) and antimicrobial therapy, 56% of surgical specialties and 47% of PHTs, respectively; courses for new prescribers, nil; (d) guidelines on SAP and on antimicrobial therapy, 100% and 71% of PHTs, respectively; (e) antimicrobial prescribing audits, 71%; and (f) antibiotic consumption and antimicrobial resistance data periodically fed back to wards, 100% and 88% of PHTs, respectively. Low overall quality scores were observed for antibiotic committee, education and auditing activities. The mean ICATB score was 11.94 points, varying significantly among trusts (5.25–16.25 points). In conclusion, all PHTs have implemented an ASP, although significant differences exist between trusts. Antimicrobial committee organisation, education and auditing activities represent the most critical points and need to be addressed by regional programmes in order to harmonise the healthcare system.