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Global Antimicrobial Resistance, Prescribing, and Efficacy in Neonates and Children (GARPEC) project: a low proportion of lower respiratory tract infections in children are being treated by the 2014 WHO recommendations

Yingfen Hsia^{*1}, Julia Anna Bielicki¹, Andrew Whitelaw², Theo Zaoutis³, Rebecca Lundin⁴, Mike Sharland¹

¹*Paediatric Infectious Disease Research Group, Institute for Infection and Immunity, St. George's University of London*

²*Stellenbosch University / Nhls; Medical Microbiology*

³*Children's Hospital of Philadelphia*

⁴*Penta Foundation*

Background: Lower respiratory tract infection (LRTI) is the commonest condition for which antibiotics are prescribed to children. LRTI is one of the leading causes of mortality in children aged under 5 years according to the World Health Organisation (WHO). Amoxicillin is the first choice antibiotic for LRTI in children in the WHO recommendation. However, there is currently limited evidence on global antibiotic prescribing in children with LRTIs. This study aimed to describe patterns of antibiotic use in childhood LRTIs.

Material/methods: The GARPEC project facilitates global standardized surveillance for antimicrobial use in hospitalized children and neonates. Through GARPEC, two Point Prevalence Surveys (PPSs) of antimicrobial prescribing were conducted; one between February and March 2016, the other from May to June 2016. The surveys were conducted in 59 hospitals in 20 countries covering 5 WHO georegions, and included children and neonates receiving an antimicrobial on the day of PPS. Data collected included age, gender, weight, antimicrobial agents, dose, frequency, mode of administration, and reasons for treatment. A web-based surveillance system was used for data collection across country. Children aged < 18 years receiving at least one antibiotic (ATC code: J01) for LRTI treatment on the day of survey were included.

