

KASIC NEWSLETTER

Issue Three, Volume Two

*Pictured Top: Maysville, Kentucky
Attribution to JNix*



Wrapping Up Antibiotic Awareness Week

November 18-24 marked the annual Global, U.S. and KY Antibiotic Awareness Week, where organizations across the world work together to promote the safe use of antibiotics and educate the public about the need to avoid unnecessary use of these life-saving medications.

This year the CDC's slogan to promote US Antibiotic Awareness Week was "Improve Antibiotic Use, Improve Health Equity".

Though Antibiotic Awareness Week is over, we can keep advocating for optimal use of antibiotics 52 weeks out of the year!

[Click here for more info from the CDC!](#)

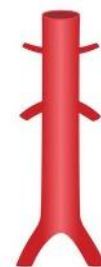
Why Question a Quinolone?

A recent study published in *Pharmacotherapy* highlights one of the most devastating side effects of fluoroquinolone antibiotics: aortic aneurysm or dissection.

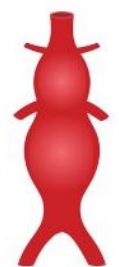
Garg M et al performed a retrospective matched cohort study comparing fluoroquinolones and macrolides and found during a 60 day follow up, the fluoroquinolone cohort had an adjusted hazard ratio of 1.34 (95% CI 1.17-1.54) of aortic aneurysm or dissection relative to the macrolide cohort. Additionally, subgroup analysis did not reveal significant differences in rates of aortic events associated with ciprofloxacin or levofloxacin, which supports FDA's warning for this drug class.

[Read the study](#)

[Read KASIC's pearl on quinolones](#)



Healthy abdominal aorta



Abdominal aorta with aneurysm

Image: <https://www.vascularcures.org/abdominal-aortic-aneurysms>



KASIC Cases

Each week, a fictional case describing a common antimicrobial stewardship opportunity is posted on X (formerly Twitter) and LinkedIn. Participants are encouraged to answer the poll first and then review the best answer along with an explanation.

Ready to test your antimicrobial stewardship knowledge?

Try out the latest case:

A 35 year old patient presents to the ER with abdominal pain and diarrhea x 2 days. A CT shows diverticulitis but no abscess or other complications and WBC = 7. They are stable for discharge home. Should antibiotics be prescribed?

- A. Yes
- B. No

[Click here for the BEST answer](#)

[Read more cases here](#)

[Follow KASIC on X and LinkedIn](#)

Decrease Dosing Frequency, Increase Adherence!

See below the visual abstract for a new study recently published in Open Forum Infectious Diseases demonstrating similar outcomes between twice daily and four times daily dosing of cephalexin in the treatment of uncomplicated urinary tract infections in outpatient females!

Two Times versus Four Times Daily Cephalexin Dosing for the Treatment of Uncomplicated UTI in Females

Yetsko A et al. 2023 | Open Forum Infectious Diseases



Retrospective Cohort

Cephalexin is a commonly prescribed first-generation cephalosporin with excellent bioavailability and urinary penetration; however, little data exist to support optimal dosing for uncomplicated UTI. Outpatient Settings



Twice daily cephalexin is as safe and effective as four times daily dosing for uncomplicated urinary tract infection in females. Less frequent dosing may improve patient adherence and satisfaction with treatment.

Open Forum Infectious Diseases

Full text not published yet, reference pending

[Click here to read study](#)

Latest Clinical Education Pearls: Click to Read!

[BID Cephalexin Dosing in Cystitis](#)

[Three versus Five Days of Azithromycin](#)

[Know your Antibiotic: Ceftriaxone for MSSA Infections](#)