

KASIC NEWSLETTER

Issue Eight, Volume Four

*Pictured Top: Churchill Downs
Attribution to Michael Clevenger/Courier Journal*



National and Regional Outpatient Antibiotic Prescribing Trends: CDC Report

The CDC recently released updated data on outpatient antibiotic use for 2024, summarizing prescribing patterns nationally and by state, with comparisons to prior years. In 2024, a total of 256 million antibiotic prescriptions were dispensed nationwide, corresponding to a rate of 752 prescriptions per 1,000 population—slightly decreased from 756 per 1,000 in 2023. Penicillins remained the most commonly prescribed class, followed by cephalosporins and macrolides.

In Kentucky, antibiotic prescribing decreased from 1,128 to 1,089 prescriptions per 1,000 population from 2023 to 2024; however, the state remains the third highest prescriber nationally. Notably, the Southern region continues to represent the greatest opportunity for improvement in outpatient antibiotic use. A limitation of the data is the ability to assess for appropriateness but nonetheless, this data provides a great view of antibiotic prescribing trends over the years and by region.



[Click here for CDC data!](#)

Tapered versus Standard Oral Vancomycin for *C. difficile* Infections

Clostridioides difficile infection (CDI) has a high incidence rate in the United States and carries a significant risk of recurrent CDI (rCDI) within 8 weeks of successful treatment. Limited studies have evaluated benefits of tapered vancomycin regimens for prevention of rCDI compared with standard dosing.

A recent multicenter randomized clinical trial evaluated whether a 4-week vancomycin taper regimen was superior to a standard 2-week vancomycin regimen in preventing rCDI after initial clinical improvement. Patients undergoing treatment for a first episode or first recurrence were included. Among 256 adults enrolled, by day 56, rCDI occurred in 14.8% of patients receiving tapered vancomycin compared with 17.7% of those receiving standard vancomycin. The tapered regimen had a 73.8% probability of superiority compared with the standard regimen. Despite early termination due to recruitment concerns, the findings suggest that a vancomycin taper may provide a modest reduction in recurrence risk. Based on this study, tapered vancomycin could be an alternative option for patients in whom fidaxomicin (which is favored over standard vancomycin in [guidelines](#)) is unavailable or cost prohibitive.

[Click here to read the study!](#)



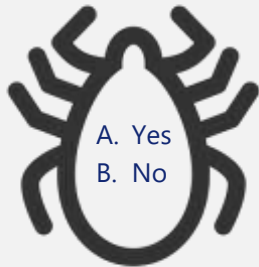
KASIC Cases

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 24-year-old male presents to the urgent care complaining of a recent tick bite. He reports he went hiking earlier in the day and found a tick bite attached afterwards. He removed the tick but did not keep it. Does he need prophylaxis?



[Click here for the BEST answer](#)

[Read more cases here](#)

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Expanded Indication for RSV Vaccine

The FDA recently expanded the approved age range for the RSV vaccine [Arexvy](#). Previously, it was approved only for those 60 years and older or 50-59 years old at increased risk of lower respiratory tract disease caused by RSV.

Last month, the indication was expanded to include adults 18-49 who are at risk of lower respiratory tract disease caused by RSV. In the study, patients who were considered at increased risk were those with chronic pulmonary disease, chronic cardiovascular disease, diabetes, chronic kidney or liver disease, or neurological or neuromuscular disease.

[Click here to read the press release!](#)

Latest Clinical Education Pearls: Click to Read!

[Quinolone Cross-Reactivity](#)

[Surgical Prophylaxis Duration With a Drain](#)

[Limit Lyme](#)