Nevyhnutná deeskalácia antibiotík

Kazuistika

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DETSKÁ FAKULTNÁ NEMOCNICA KOŠICE

Konflikt záujmov

- Bez konfliktu záujmov

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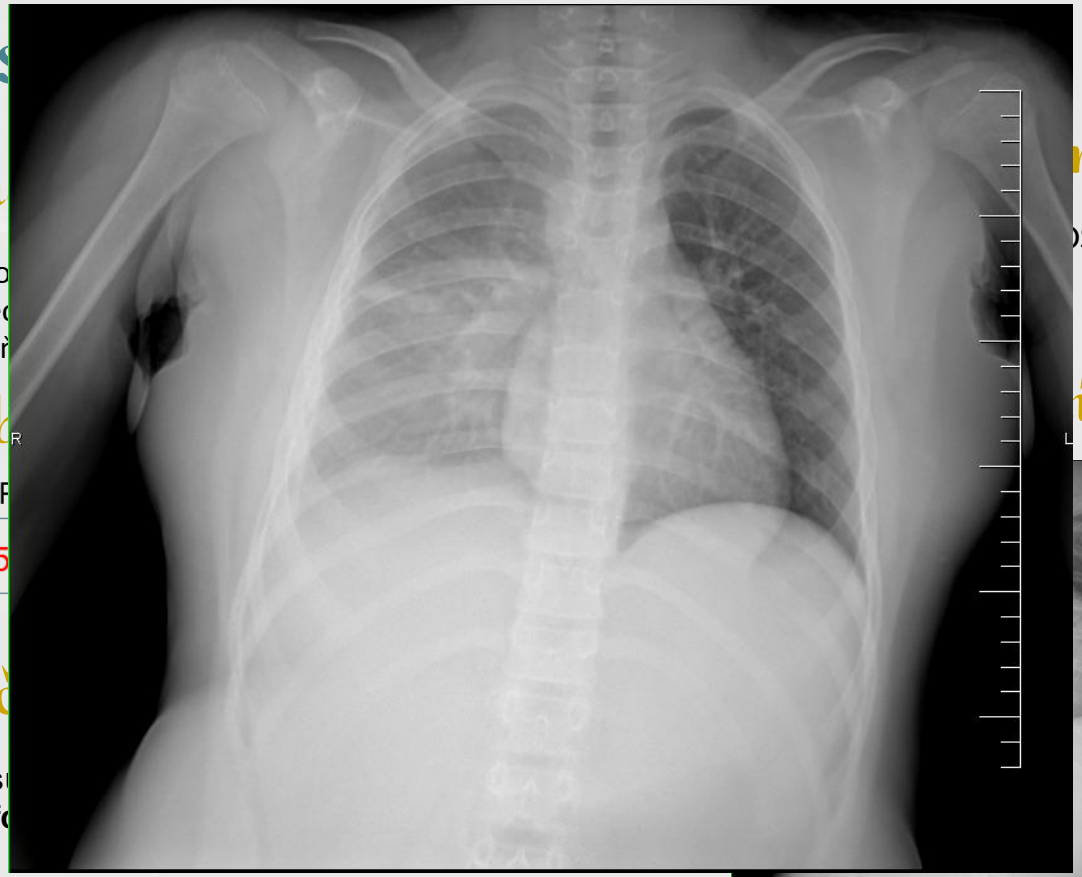

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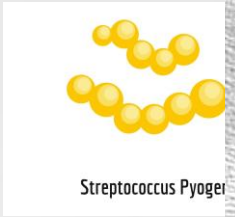

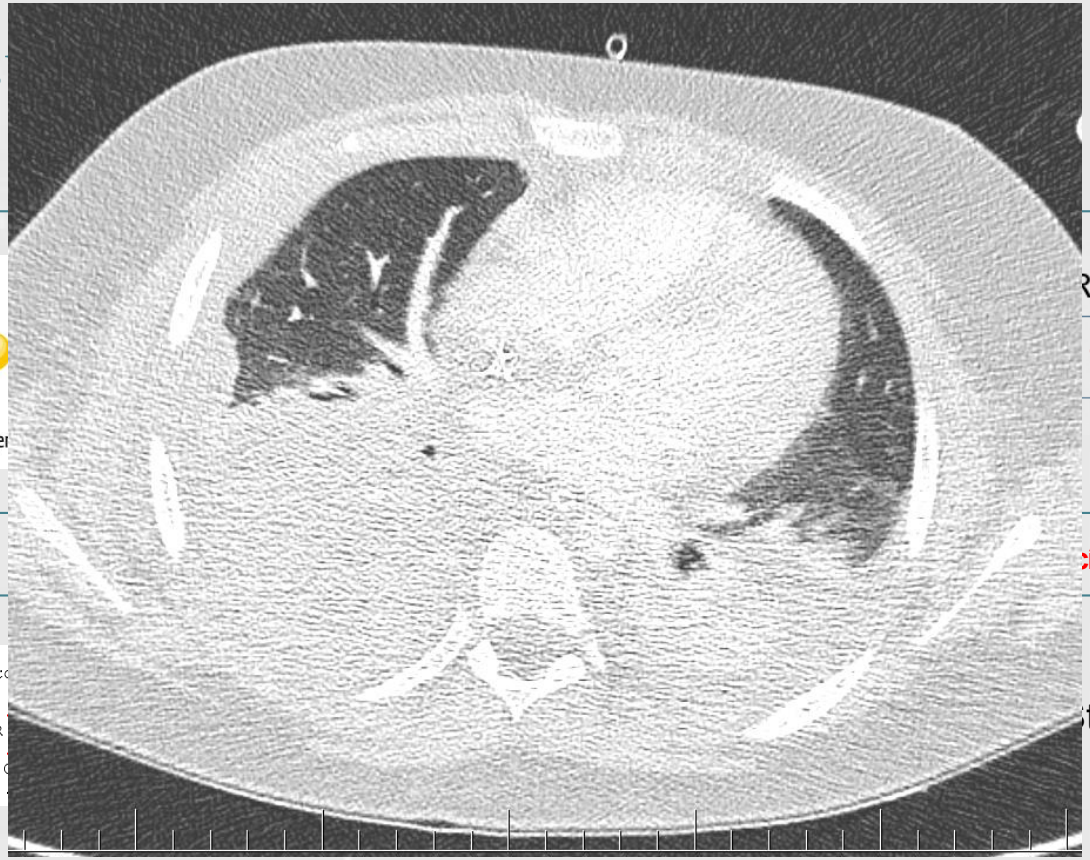

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Prítomnosť patogénu: Streptococc

Klindamycín.....
Erytromycín..... R
Moxifloxacín.....
Penicilín..... C
Tetracyklín.....

tabilizácia

Kazuistika: deeskalácia liečby

- Deeskalácia antibiotickej liečby
  - ~~Meropenem + Linezolid +~~ Moxifloxacín

Kazuistika: odporúčanie

8. V momente, keď patogén a jeho citlivosti sú známe, ***odporúčame*** zúžiť empirickú antimikrobiálnu terapiu

ANTIMICROBIAL THERAPY

6. In children with septic shock, we **recommend** starting antimicrobial therapy as soon as possible, within 1 hour of recognition (strong recommendation, very low quality of evidence). PICO 6

6. In children with sepsis-associated organ dysfunction but without shock, we **suggest** starting antimicrobial therapy **as soon as possible** after appropriate evaluation, within 3 hours of recognition (weak recommendation, very low quality of evidence). PICO 6

7. We **recommend** empiric broad-spectrum therapy with one or more antimicrobials to cover all likely pathogens (BPS). PICO 5

8.Once the pathogen(s) and sensitivities are available, we **recommend** narrowing empiric antimicrobial therapy coverage (BPS). PICO 9

9. If no pathogen is identified, we **recommend** narrowing or stopping empiric antimicrobial therapy according to clinical presentation, site of infection, host risk factors, and adequacy of clinical improvement in discussion with infectious disease and/or microbiological expert advice (BPS). PICO 9

10.In children without immune compromise and without high risk for multidrug-resistant pathogens, we **suggest** against the routine use of empiric multiple antimicrobials directed against the same pathogen for the purpose of synergy (weak recommendation, very low quality of evidence). PICO 8/9

Remarks: In certain situations, such as confirmed or strongly suspected group B streptococcal sepsis, use of empiric multiple antimicrobials directed against the same pathogen for the purpose of synergy may be indicated.

11. In children with immune compromise and/or at high risk for multidrug-resistant pathogens, we **suggest** using empiric multi-drug therapy when septic shock or other sepsis-associated organ dysfunction in present/suspected (weak recommendation, very low quality of evidence). PICO 8/9

12. We **recommend** using antimicrobial dosing strategies that have been optimized based on published pharmacokinetic/ pharmacodynamic principles and with consideration of specific drug properties (BPS). PICO 7

13.In children with septic shock or sepsis-associated organ dysfunction who are receiving antimicrobials, we **recommend** daily assessment (eg., clinical, laboratory assessment) for de-escalation of antimicrobial therapy (BPS). PICO 11

Remarks: This assessment should include a review of the ongoing indication for empiric antimicrobial therapy after the first 48 hours that is guided by microbiologic results and in response to clinical improvement and/or evidence of infection resolution. This recommendation applies to patients being treated with empiric, targeted, and combination therapy.

14. We **recommend** determining the duration of antimicrobial therapy according to the site of infection, microbial etiology, response to treatment, and ability to achieve source control (BPS). PICO 10

Surviving Sepsis Campaign International Guidelines for the Management of Septic Shock and Sepsis-Associated Organ Dysfunction in Children 2020

Kazuistika: o 5 dní neskôr

Zhoršenie klinického stavu

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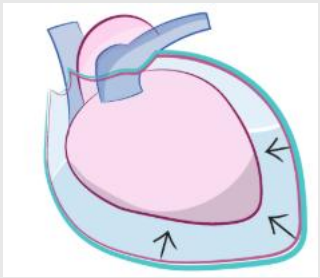

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Východoslovenský ústav srdcových a cievnych chorôb, a.s.

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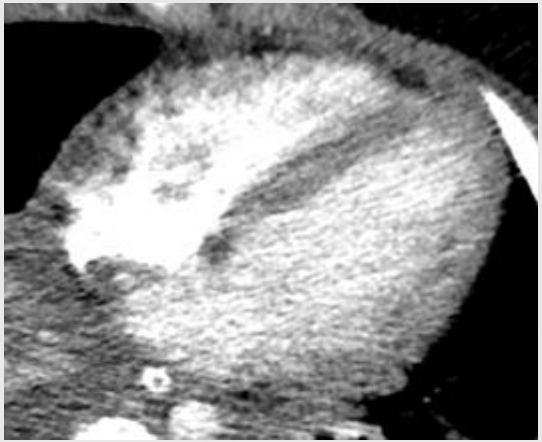

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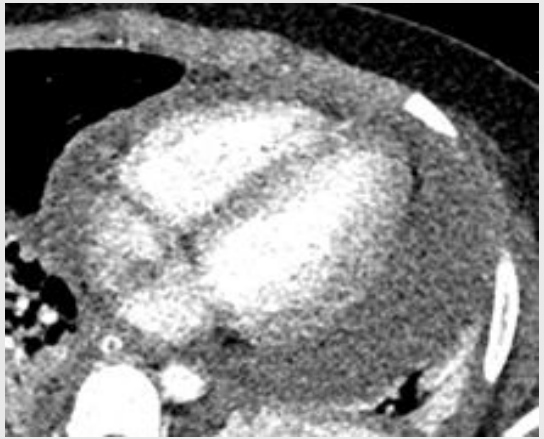


Záver: Normálna anatómia srdca. Známky hyperkinetickej cirkulácie v.s. pri anémii a akt. vyššom TK. Stopová trikuspidálna a pulmonálna insuficiencia - hemod. nezávažná, bez známok PH a PE. Normalizácia funkcie srdca (EF 61%), primerané metrické parametre.

Akútna perikarditída: etiológia

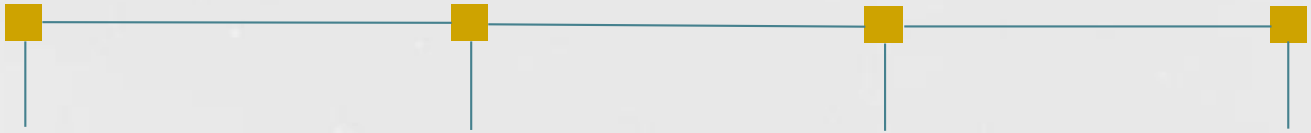
Infekčná

- **Bakteriálna**
  - Mycobacterium tuberculosis
  - Streptococcus pyogenes
- Vírusová
- Mykotická
- Parasity

Neinfekčná

- **Autoimunita**
  - Systémové ochorenia
  - Autoinflamačné ochorenia
- Neoplázia
- Metabolická
- Lieky a toxíny
- Trauma
- Radiácia
- Iatrogrénna
- Iné

Akútna perikarditída: etiológia



PCR + kultivácia výpotku negatívna

Cytológia výpotku záplava PMN

Susp. infekcia per continuitatem

Ceftarolin + Linezolid

Prepustenie domov

Záver

Napriek tomu, že sme postupovali podľa oficiálnych odporúčaní, nie vždy to prinesie prospech pre pacienta.

Ďakujem