

5.2 Empirical antibiotic therapy for community acquired pneumonia: where are we?

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ABSTRACT

Introduction

Community acquired pneumonia is a leading cause of death in the world and it is the ninth in Sri Lanka. In the management of pneumonia, prompt initiation of empirical antibiotic therapy is critical. Compliance with an appropriate guideline is important in empirical antibiotic therapy in order to optimize the tentative coverage of possible pathogens and to prevent emergence of drug resistance. There are different guidelines published locally (Ministry of Healthcare and Nutrition – Sri Lanka) and internationally (British Thoracic Society, Infectious Disease Society of America) to guide the empirical antibiotic therapy.

General objective

To determine compliance of empirical antibiotic therapy in the treatment of patients with community acquired pneumonia, of with all three above mentioned guidelines for the hospitalised patients in general medical wards in Sri Lankan setting.

Method

Setting: Colombo North Teaching Hospital Ragama and Chest hospital Welisara

Study period – October 2003 – August 2004

Study population: Hundred and eight patients with community acquired pneumonia (diagnosed clinically and radiologically) were studied with regard to received empirical antibiotic therapy.

Results

Of the 108 patients, only 57.4%, 41.6%, 62.2% were managed in accordance with national guidelines of Sri Lanka, guidelines published by Infectious Disease Society of America and British Thoracic Society respectively. In the study population, 37.8% of patients were not managed according to any of the above guidelines.

Conclusion

In a large proportion of cases of community acquired pneumonia admitted to Colombo North Teaching Hospital, Ragama and Chest hospital, Welisara, empirical antibiotic therapy did not comply with currently available guidelines.