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Antibiotic treatment in the hospital:

Sometimes it can be stopped

Antibiotics are strong drugs. They fight the infections caused by bacteria. But antibiotics can do more harm than good if you don't need them. So the U.S. Centers for Disease Control and Prevention (CDC) is now urging hospitals to cut back on these drugs when they are not needed. Here's what you should know.

You might get antibiotics when you check in to the hospital.

This can happen if you have an infection that may be serious, like pneumonia. Your doctor wants to treat you right away, even before you can get test results. Your doctor may give you more than one antibiotic. Or you may get a “broad-spectrum” antibiotic that kills many types of bacteria.

Doctors should review your drugs after test results are in.

Your test results usually come on your third day in the hospital. At this point the doctor should review your drugs:

If test results don't show an infection, and you're doing well, usually the doctor can stop the antibiotics.

If the tests do show an infection, the doctor can often modify your treatment to a single antibiotic. Or



the doctor may switch you to a “narrow-spectrum” antibiotic, which targets the specific type of bacteria causing your infection.

Reducing your antibiotics is called “de-escalation.” It can improve your treatment. It also helps to prevent antibiotic overuse.

How to protect against antibiotic overuse in the hospital

Up to half of antibiotic prescriptions in U.S. hospitals are unneeded or inappropriate, says the CDC. If you are prescribed antibiotics during a hospital stay, consider asking the questions below.

What is this drug for? If your doctor thinks you have a bacterial infection, ask if you can be tested for it before you start antibiotics.

Do I really need antibiotics, or can they be stopped? You can ask this question every day, but on day three might be best. By then, your test results should be back. Ask the doctor to check your prescription now that your test results are back. Tell your doctor that you only want antibiotics if you need them.

What type of antibiotic is it? If it's a broad-spectrum drug, ask if it's necessary. A narrow-spectrum antibiotic, such as penicillin, is usually a better choice.

How long should I take it? Ask your doctor to prescribe antibiotics for the shortest time possible.

Antibiotic overuse causes resistance.

Broad-spectrum antibiotics are more likely to lead to bacteria that resist drugs. This leads to infections that last longer and cost more to treat. They can spread to family and friends.

Antibiotics have side effects.

Broad-spectrum antibiotics can lead to a dangerous form of diarrhea, called "C. diff." It can require removal of the bowel. It kills about 15,000 people in the U.S. each year.

Antibiotics can also cause other side effects, such as vaginal infections, nausea, and vomiting. They can cause serious allergic reactions such as rashes, swelling of the face and throat, and breathing problems. Some antibiotics have been linked to torn tendons and permanent nerve damage.

Antibiotic overuse wastes money.

Broad-spectrum antibiotics:

- Often cost more than narrow-spectrum drugs.
- Need an intravenous (IV) line, so you must stay in the hospital longer.
- May have more costly side effects and complications.

When do you need broad-spectrum antibiotics?

You may need them if:

- You're not getting better.
- Tests show that drug-resistant bacteria are causing your infection.
- The tests could not be done, or the results were not clear.

This report is for you to use when talking with your health-care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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