Antimicrobial Stewardship in Wound Care

7 Tips

Right patient, right treatment, right dose, right duration



Regular hand disinfection and proper contact precautions are key in preventing wound infection



Avoid prescribing antimicrobials when they are not indicated



When antimicrobial therapy is indicated, prescribe an appropriate regimen



Order therapy for the correct duration, at the optimal dose and by the appropriate route⁵



5. Use an agent that has the least risk for adverse effects for the patient and the community^{6,7}



6.
Interdisciplinary
collaboration helps inform
and enforce AMS



7.
Every healthcare worker is responsible for being aware of local AMR issues and for undertaking AMS



Managing the Crisis of Antibiotic Resistance

The global prevalence for non-healing wounds (also referred to as chronic wounds, hard-to-heal wounds or complex wounds) with mixed aetiologies has been estimated at 2.21 per 1000 population.¹ The number of individuals developing non-healing wounds is increasing due to changing lifestyles² and an ageing population.³ A paper in *The Lancet* (2022) approximated that in 2019 there were 4.95 million global deaths associated with, and 1.27 million deaths directly attributable to, bacterial antimicrobial resistance (AMR).⁴ With the growing global problem of AMR, clinicians must use antibiotics wisely. This means following the principles of antimicrobial stewardship (AMS).



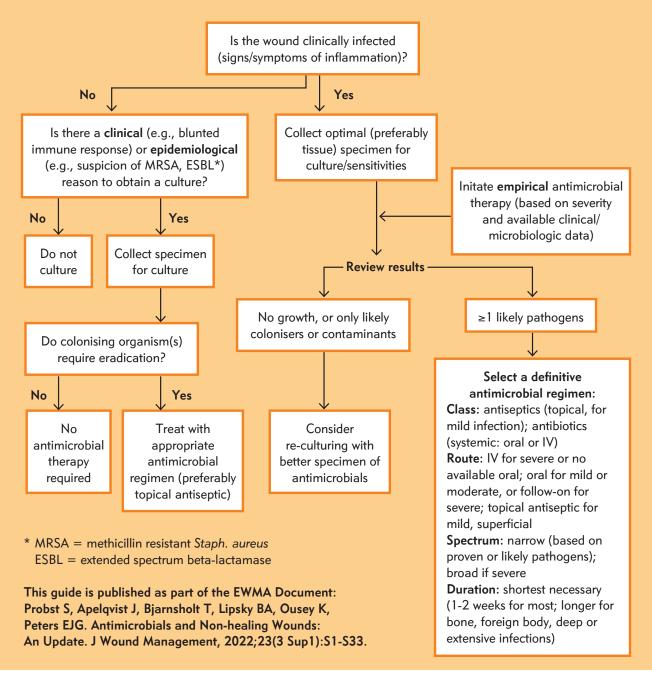


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An antimicrobial strategy for non-healing wounds should include:

- Routinely determining if the wound is infected
- Surveillance programmes for wound infection
- Clear and achievable metrics
- Local policies to review the appropriateness of antimicrobial use
- An interdisciplinary team of specialists supervising AMS efforts
- Accessible multi-professional educational programmes
- Antimicrobial guardianship programmes
- Patient awareness campaigns

A Concise Approach to Treating Potientially Infected Wounds







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