## ANTIBIOTIC CONSUMPTION PATTERN IN A NEONATAL SPECIAL CARE UNIT BEFORE AND AFTER IMPLMENTATION OF HOSPITAL ANTIBIOTIC POLICY

A. Nitsch-Osuch<sup>1</sup>, E. Kuchar<sup>2</sup>, K. Życinska<sup>1</sup>, <u>D. Kurpas<sup>3</sup></u>, T. Zielonka<sup>1</sup>, K. Wardyn<sup>1</sup>

<sup>1</sup> Department of Family Medicine, Warsaw Medical University, Banacha 1a, blok F, 02-097 Warsaw, Poland, anitsch@amwaw.edu.pl

<sup>2</sup> Department of Pediatric Infectious Diseases, Wroclaw Medical University, Bujwida 44, 50-345 Wroclaw, Poland, ernestkuchar@gmail.com

<sup>3</sup> Department of Family Medicine, Wroclaw Medical University, Syrokomli 1, 51-141 Wroclaw, Poland, dkurpas@hotmail.com

**Introduction.** Current and detailed knowledge of antibiotic use is essential in order to implement strategies for reducing the overuse and misuse of antibiotics. The objective of our study was to assess antibiotic consumption in the Special Neonatal Care Unit (SNCU) in Warsaw (Poland) before and after implementation of hospital antibiotic policy (HAP).

**Material and methods.** Antibiotic usage was calculated in daily defined doses (DDDs) per 100 patient days and DDDs per 100 admissions. The antibiotics were ranked by volume of DDDs and the number of antibiotics that accounted for 90% and 100% of the total volume, DU90% and DU100% respectively (where DU stands for drug use).

**Results.** The total antibiotic consumption slightly increased after implementation of HAP: the total DDS was 707,865 and 753,12 respectively in 2011 and 2012, while the number of DDD/100 admissions was 352,17 in 2011 and 369,12 in 2012. After implementation of HAP there was observed an t increase of usage of ampicillin and aminoglicosides and reduction of DU100% and DU90% rates (respectively 15 vs 9 and 4 vs 3).

**Conclusions.** The implementation of HAP in our SNCU resulted in changes in antibiotic consumption patterns not in a general antibiotic consumption density.