



Special Supplement

EPI Update for Friday, November 19, 2021

Office of the Public Health Medical Director
Center for Acute Disease Epidemiology (CADE)
Bureau of HIV, STD, and Hepatitis



At least 28% of antibiotics prescribed in U.S. outpatient settings are unnecessary. Each year, enough prescriptions are written in outpatient settings to give five out of every six Americans one antibiotic prescription. Any time antibiotics are used, they can cause side effects and contribute to the development of antibiotic resistance, one of the most urgent threats to the public's health. As part of IDPH's ongoing efforts to improve antibiotic stewardship in Iowa, we are participating in CDC's *U.S. Antibiotic Awareness Week* and devoting this Special Supplement Epi Update to antibiotic stewardship. Look for messaging on IDPH social media channels by searching for **#BeAntibioticsAware** and **#USA AW21**.

Be Antibiotics Aware: Protect your patient

To help fight antibiotic resistance and protect patients from antibiotic-related adverse drug events, CDC is urging health care professionals to prescribe antibiotics only when necessary. During *U.S. Antibiotic Awareness Week* and throughout the year, CDC promotes *Be Antibiotics Aware*, an educational effort to raise awareness about the importance of safe antibiotic prescribing and use.

The *Be Antibiotics Aware* initiative provides resources to help improve antibiotic prescribing among health care professionals and use among consumers.

CDC's *Be Antibiotics Aware* educational effort encourages health care professionals to:

- Only prescribe antibiotics when they are clinically indicated. Antibiotics are only needed to treat certain infections caused by bacteria, not viruses like SARS-CoV-2. You can do harm by prescribing antibiotics when they are not needed.
- Follow clinical guidelines on how best to evaluate and treat infections.
- Optimize the use of diagnostic tests, which is critical for improving treatment of conditions like sepsis and stopping the spread of infections, including those caused by SARS-CoV-2.

- Always prescribe the right antibiotic, at the right dose, for the right duration, and at the right time.
 - Using the shortest effective duration of antibiotic therapy is a key antibiotic stewardship strategy in all health care settings. The goal is to optimize the treatment of the infection while minimizing the risks of side effects from antibiotics and antibiotic resistance.
- Tell patients why they don't need antibiotics for a viral respiratory infection, what to do to feel better, and when to seek care again if they don't feel better.
- Talk to patients and their families about possible harms from antibiotics, such as allergic reactions, *C. difficile*, and antibiotic-resistant infections.
- Educate patients and their families to recognize the signs and symptoms of worsening infection and sepsis, and to know when to seek medical care.
- Gather patient information and immediately communicate it to hospital health care professionals if sepsis is suspected. Antibiotics should be started as soon as possible when sepsis is suspected.

For more information, visit www.cdc.gov/antibiotic-use/index.html.

C. diff educational resources for health care providers, public

Clostridioides difficile (*C. diff*) is a germ that causes diarrhea and inflammation of the colon. Most cases of *C. diff* infection occur while someone is taking antibiotics or not long after they have finished taking antibiotics. It is estimated to impact almost half a million people in the U.S. annually, and causes an estimated 29,300 deaths.

Awareness surrounding *C. diff* is incredibly important, and educating patients and colleagues on the significance of protecting themselves, their families, and stopping the spread is critical for achieving good clinical outcomes.

The following resources can be used to help educate others about *C. diff*:

- [CDC: Fact sheets and social media graphics](#)
- [CDC: Safe Healthcare guest blog - the personal experience of a C. diff infection survivor](#)
- [CDC: Who is at risk for C. diff infection?](#)
- [CDC: Prevent the spread of C. diff in the hospital and at home](#)

For more information about *C. diff* and antibiotic prescribing visit www.cdc.gov/cdiff/index.html and www.cdc.gov/antibiotic-use/index.html.

Antibiotic Use in the United States, 2021 Update: Progress and Opportunities

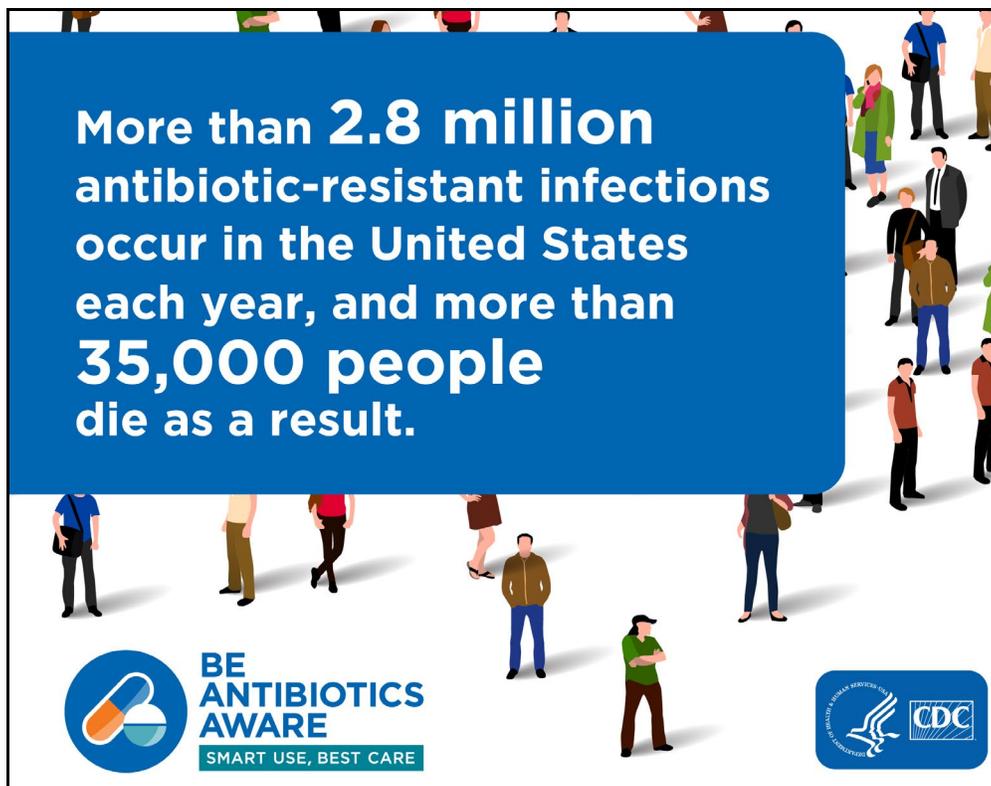
Antibiotic stewardship remains critical to optimize the treatment of patients who have infections, protect patients from harm, and combat antibiotic resistance. In 2020, CDC released *Antibiotic Use in the United States, 2020 Update: Progress and Opportunities*, which highlighted how antibiotics are being used in the U.S. through data, new resources, and examples of stewardship activities across all health care settings, with a look at new challenges presented by the COVID-19 pandemic.

Some of the data, resources, and antibiotic stewardship examples included in the 2021 update capture the impact of the COVID-19 pandemic on U.S. antibiotic use and stewardship activities.

The 2021 update also contains:

- Progress on the goals contained in *the U.S. National Action Plan for Combating Antibiotic-Resistant Bacteria (CARB)*, first published in 2015 and updated in 2020
- Data describing U.S. outpatient antibiotic prescribing rates and implementation of hospital antibiotic stewardship programs by state, including examples of stewardship accomplishments during the COVID-19 pandemic
- Summaries of recently published literature highlighting progress and opportunities for stewardship across all health care settings
- New and updated resources for health departments, facilities, health care professionals, and payers to implement antibiotic stewardship
- Data on antibiotic use and examples of stewardship during the COVID-19 pandemic
- Emerging opportunities for antibiotic stewardship

To view the entire report, visit www.cdc.gov/antibiotic-use/stewardship-report/current.html



Have a healthy and happy week!

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