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Use of antibiotics by junior medical doctors in a selected medical unit of Sri Lanka.

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### Objectives

Rational use of antibiotics is vital for the best recovery from infections and to minimise antibiotic resistance. Junior doctors are the first persons to initiate antibiotics in most hospitals. The Sri Lanka College of Microbiologists released antibiotic guidelines in 2016, however adherence to this is not known. Objective of this study was to analyse the antibiotic selection by the junior doctors and to compare it with local guidelines.

### Method

Retrospective analysis of medical records were done at University Medical Unit of the Colombo South Teaching Hospital over period of three months. All patients who were started on antibiotics on admission, were selected. Clinical diagnosis, antibiotics prescribed were recorded and compared with local antibiotic guidelines.

### Results

Among 136 patients, 30.1% had lower respiratory tract infections including pneumonia, 12.5% had urinary tract infections (UTI), 12.5% had exacerbations of bronchial asthma (BA), 12.5% had acute gastroenteritis (AGI) and 2.2% had cellulitis. Antibiotics were stopped subsequently, as the diagnosis was viral infections. Co-amoxiclav was the commonest antibiotic prescribed (LRTIs - 74.4%, UTIs - 71.4%, COPD & BA - 70.6%) except for acute gastroenteritis where ciprofloxacin was used in 50%. Appropriate antibiotic use was found, 100% in cellulitis, 85.9% in UTI, 82.4% in COPD & BA and 80% in AGI.

### Conclusions

Co-amoxiclav was the commonest antibiotic used for variety of infections in hospital. Though antibiotic selection was mostly appropriate by the junior doctors for common bacterial infections, antibiotics were initiated for viral infections.