Patients with current IDU on OPAT did not have less favorable treatment outcomes compared to those without current IDU”

Abstract:

BACKGROUND: Historically, there has been a restrictive approach toward outpatient parenteral antimicrobial therapy (OPAT) in patients with injection drug use (IDU) due to the fear that they might utilize the intravenous catheter to inject illicit substances.

OBJECTIVE: We tested the hypothesis that patients with current IDU on OPAT would have less favorable treatment outcomes compared to those without current IDU.

METHODS: In this retrospective cohort chart review study of Cleveland Clinic OPAT registry, we identified patients with current IDU by both electronic and manual review. For each patient with current IDU, we identified 3 matched controls among those on OPAT and without current IDU, by propensity score matching on age, sex, OPAT year, and OPAT diagnosis. We compared treatment failure, infection relapse, line infection, hospital readmission, number of emergency room visits, and 90-day mortality, for patients with current IDU and their matched controls.

RESULTS: We identified 39 patients with current IDU and 117 matched controls. Most patients with current IDU (82%) were discharged to skilled nursing facilities, whereas the majority of the control group (74%) was treated at home ($p < 0.01$). There was no significant difference in the examined treatment outcomes between the 2 groups.

CONCLUSIONS: Patients with current IDU on OPAT did not have less favorable treatment outcomes compared to those without current IDU. Although the reason for this finding could potentially be related to difference in disposition, more studies need to be done to assess safety of home disposition among these patients.
Reference:
