

The objective of this study was to describe the long-term effectiveness and safety of ceftaroline for the treatment of OAI” Athans et al (2016).

Abstract:

Objectives: There are few convenient intravenous options for long-term outpatient treatment of osteoarticular infection (OAI) and limited effectiveness and safety data exist for this off-label use of ceftaroline. The objective of this study was to describe the long-term effectiveness and safety of ceftaroline for the treatment of OAI.

Methods: This was a matched retrospective cohort study of patients receiving ceftaroline- or vancomycin-based therapy for OAI in the outpatient setting. Patients were matched according to infection subtype, anatomical site and microbiology. The primary endpoint was 180 day infection-related readmission (IRR). Secondary endpoints included all-cause readmission, time-to-IRR and adverse event incidence.

ReTweet if useful... Outpatient use of ceftaroline fosamil versus vancomycin for osteoarticular infection <http://ctt.ec/6ufcY+> @ivteam #ivteam

Click To Tweet

Results: The final matched cohort consisted of 50 ceftaroline-treated patients and 50 vancomycin-treated patients. The IRR incidence was 22% for ceftaroline patients and 30% for vancomycin patients; OR=0.66 (95% CI=0.27-1.62; P=0.362). There was no significant difference between groups in all-cause readmission or time-to-IRR. Attributable adverse event incidences were 24% and 18% for ceftaroline and vancomycin, respectively. Rash (10%) and nausea (6%) were the most common ceftaroline adverse events, while acute kidney injury (6%) and rash (4%) were the most common vancomycin adverse events.

Conclusions: Attributable readmission and adverse events were common among patients treated with outpatient intravenous antimicrobials for OAI. This study found no appreciable difference in effectiveness or tolerability between ceftaroline- or vancomycin-treated patients. Although further research will be important to delineate the role of ceftaroline in the management of OAI, data derived from this study may aid clinicians in determining therapy when limited options exist.



Reference:

Athans, V., Kenney, R.M., Wong, J. and Davis, S.L. (2016) Outpatient use of ceftaroline fosamil versus vancomycin for osteoarticular infection: a matched cohort study. *Journal of Antimicrobial Chemotherapy*. 71(12), p.3568-3574.

doi: 10.1093/jac/dkw326

Thank you to our partners for supporting IVTEAM