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Antimicrobial susceptibility testing practices at cystic fibrosis care centers

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Antimicrobial Susceptibility Testing Practices Among Cystic Fibrosis Care Centers

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Background

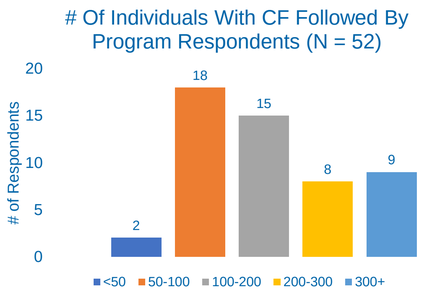
- Data suggest a lack of correlation between respiratory culture antimicrobial susceptibility testing (AST) and clinical outcomes among people with cystic fibrosis (CF)
- AST is recommended by the CF Foundation (CFF) and the Cystic Fibrosis Trust
- A survey of CF center program directors and CF pharmacists was conducted to understand how AST is performed in North American CF centers

Methods

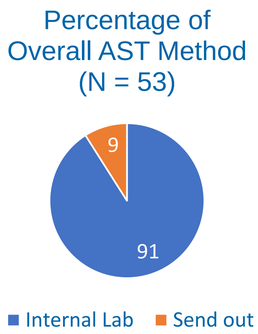
- A survey was sent by the CFF to North American CF program directors and pharmacists via a CFF email distribution list
- A reminder email was sent two weeks later
- The survey was conducted using the online platform Survey Monkey® and responses were anonymous

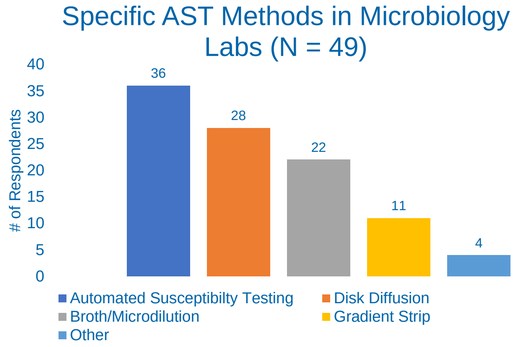
Results: Survey Completion

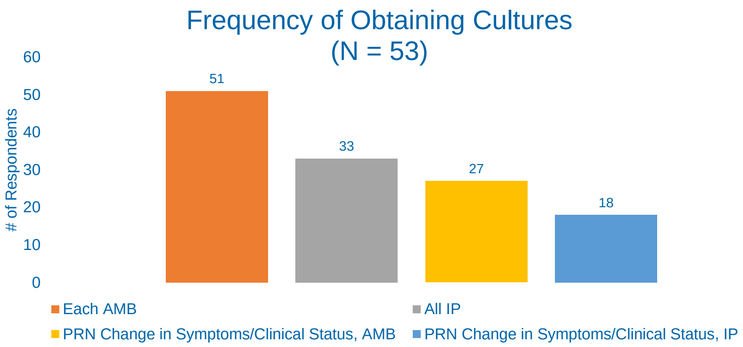
- The survey was completed by 39 of the 111 (35%) program directors that opened the email
- The survey was completed by 18 pharmacists of the 301 subscribers (includes pharmacy technicians) on the listserv (6%)
- A total of 53 unique CF programs are represented by the survey and presented in the results

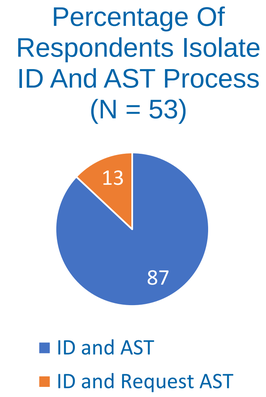


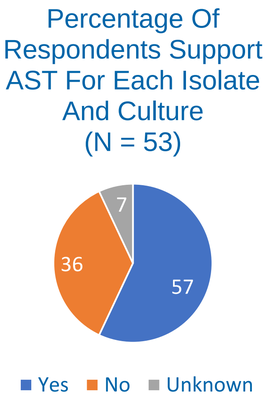
Results: Survey Respondents

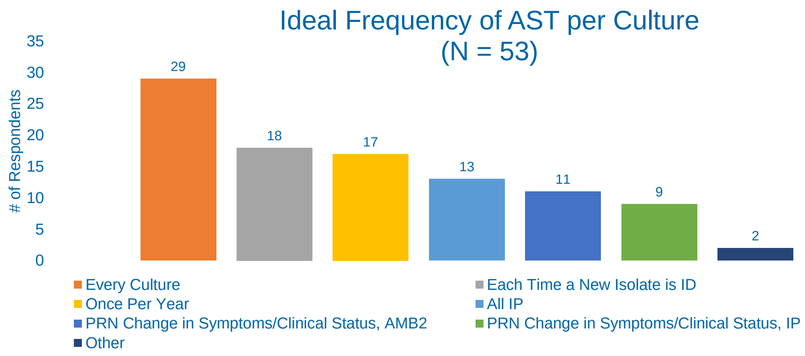












Key: Antimicrobial Susceptibility Testing (AST); Identification (ID); Ambulatory Care Visit (AMB); Inpatient Admissions (IP)

Conclusions

- The association between AST and clinical outcomes in CF remains unclear; however, most CF centers continue to routinely obtain AST for each isolate
- Almost half of program directors believed that AST was not needed for every culture
- Most program directors report using AST data to inform clinical decisions
- Additional studies are needed to more fully assess possible correlations between AST and clinical outcomes; the cost-effectiveness of AST for all isolates should be assessed

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