



## **Keynote Lecture 2**

### **Antimicrobial stewardship**

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It is now recognized that for the effective control of antibiotics in the hospital, there is a need to establish an “Antibiotics Utility Review Program” (AURP), which will conduct both surveillance and facilitation of proper antibiotics utilization. A report on the initiation of the AURP in Queen Mary Hospital will be presented which is integrated with the Infection Control programme of the hospital.

In the AURP, guidelines for antibiotics usage are formulated and implemented. Guideline is defined as a process specification for prevention or treatment of a given disease. Implementation however can be extremely difficult, and a review on the research in this subject will be presented. Education alone is definitely insufficient. Data will be presented from the QMH experience in which a specific method known as “Immediate Concurrent Feedback” (ICF) was successful in improving the usage of antibiotics both in the hospital and the outpatient. The ingenuity of ICF is that the review can be conducted relatively inexpensively by the Infection Control Nurse. It was implemented in stages and successfully saved the hospital over \$7 million (HK) and in terms of the very expensive antibiotics which were given the label “big guns”; there was a reduction of nearly 20%.

To further enhanced ICF for the “big guns”, a further selection of cases after review by the ICN was discussed and evaluated by the doctors. This second step was called “Physician ICF” and with these interventions, a compliance rate of about 95% to the guidelines could be achieved.