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Antibiotic usage and its culture sensitivity pattern in urinary tract infections at Tertiary Hospital in eastern Nepal

G P Rauniar

B P Koirala Institute of Health Science, Nepal

Background: The presence of microbial pathogens in the urinary tract is UTI (Urinary Tract Infection). In BPKIHS, each year there are around 1000 cases of UTIs. Antibiotic is empirically started after sending culture/sensitivity (c/s) with intention to change antibiotic if c/s demands.

Objectives: The objective of this study was to see the antimicrobial prescribing pattern and c/s pattern of UTI inpatients of BPKIHS together with their socio-demographic and laboratory profile.

Methods: It was a retrospective study of past one-year. As a convenience sampling, all available inpatient-records from Medical-Record Section were extensively searched for the key word "Diagnosis UTI". The relevant data were entered in Microsoft Excelsheet and analyzed with IBM SPSS 21. Ethical clearance was taken from the IRC before study.

Results: There were 86 cases from 4 different wards. There was slight female preponderance (51.16%). Fifty-five (63.95%) cases were complicated. Fever (75.51%) was the most common symptom. Only 20% were tachycardic but 90% were tachypnic. Leucocytosis (59.26%), urine albumin within 30-100mg/dl (33.85%) and >5 Urine WBC/hpf (80.26%) were seen. Ceftiaxone (50.60%) was the most commonly prescribed empirical antibiotics, followed by Cefixime (9.64%). Fourteen (16.27%) cases were culture positive. E. coli was the most (78.57%) common pathogen grown. In culture sensitivity study, Amikacin (42.85%) was the most sensitive antibiotic.

Conclusion: Eighty-six UTI inpatients were identified in the last year. Fever and Tachypnoea were very common. Leucocytosis, 1+ proteinuria and urine WBC>5/hpf were frequently seen. Ceftriaxone was the most common antibiotic prescribed. E. coli was the most common pathogen grown and Amikacin was the most sensitive antibiotic

gprauniar2004@yahoo.com