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Procalcitonin-Guided Antibiotic Therapy: Comparative Effectiveness Review Number 78

By U. S. Department of Health and Human Services

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Paperback. 276 pages. Dimensions: 11.0in. x 8.5in. x 0.6in. Sepsis is a serious condition with high morbidity and mortality for which clinical diagnostic criteria lack sensitivity and specificity. Early initiation of appropriate antibiotics and goal-directed therapies reduces mortality. Conversely, overuse and misuse of antibiotics, including continuing antibiotics longer than necessary for cure, can result in adverse events and add to the increasing problem of antibiotic resistance. Although critically ill patients in the intensive care units (ICUs) have higher morbidity and mortality rates, the same issues are also relevant to other clinical conditions, including neonatal sepsis, febrile illness in children, pneumonia, and other respiratory tract infections with respect to the initiation, duration, or change in antibiotic therapy. Again, the duration of antibiotic therapy is often undefined, and clinical features are of limited help in guiding discontinuation of therapy. Several serum biomarkers have been identified in recent years that have the potential to help diagnose local and systemic infections, differentiate bacterial and fungal infections from viral syndromes or noninfectious conditions, prognosticate, and ultimately guide management, particularly of antibiotic therapy. Among these, procalcitonin is the most extensively studied biomarker. Numerous...

Reviews

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