Antibiotic Recommendations for Uncomplicated Cystitis

Beginning in January 2017, the Joint Commission added Antimicrobial Stewardship standards to the accreditation survey. In order to comply with these changes, the Antimicrobial Stewardship team is required to follow the CDC's Core Elements of Hospital Antibiotic Stewardship Programs. Three of these standards include, tracking (monitoring antibiotic prescribing and resistance patterns), reporting (regular reporting of information on antibiotic use and resistance to prescribers and relevant staff), and educating clinicians about trends in resistance and optimal prescribing.

The Floyd and Polk Antimicrobial Stewardship teams have worked together in creating urine-specific antibiograms for local ECC patients/outpatients. Using current dosing recommendations for uncomplicated cystitis, and local urine-specific antibiograms, an uncomplicated cystitis antibiotic guide with first, second, and third-line therapy has been compiled.

Based on our declining susceptibilities in Gram-negative bacteria and their propensity for collateral damage, fluoroquinolones should no longer be considered first or second-line treatment options for uncomplicated cystitis. In addition, in 2016 the US Food and Drug Administration updated its package warnings on fluoroquinolones to include instructions that this class should not be used for uncomplicated urinary tract infections unless there was no suitable alternative agent.

Please feel free to contact either Gary Latta (Floyd Clinical Pharmacy Coordinator) or Christy Lindsey (Polk Clinical Pharmacist) with any questions or concerns regarding this antibiotic recommendation guide.