## **Covid-19 and Antibiotics**



## October 2021

Antibiotic consumption in the community in England has been trending down since 2014 and colleagues working across the system are to be commended for their continued commitment to the responsible use of this finite resource. However, the COVID-19 pandemic has been associated with precautionary prescribing of antibiotics due to clinical concerns about bacterial co-infection.

In line with NICE guidance (NG191) we would like to remind clinicians not to offer an antibiotic for preventing or treating COVID-19 unless there is a strong clinical suspicion of additional bacterial co-infection. Antibiotics should not be used as a precautionary measure to prevent secondary bacterial pneumonia in people with COVID-19.

Evidence as of March 2021 suggests that bacterial co-infection occurs in less than about 8% of people with COVID-19 and could be as low as 0.1% in people in hospital with COVID-19.

Inappropriate treatment with antibiotics exposes individuals to unnecessary side effects and contributes to antimicrobial resistance. Unnecessary use can also delay patients accessing supportive Covid-19 medicines such as Tocilizumab which can't be started alongside concurrent antimicrobials.

If antibiotics are clearly indicated for secondary bacterial pneumonia, start antibiotic treatment as soon as possible. For antibiotic choices to treat community-acquired pneumonia caused by a secondary bacterial infection, see the recommendations on choice of antibiotic in the NICE antimicrobial prescribing guideline on community-acquired pneumonia.

## **Antibiotic Prescribing Target Update**

The System Oversight Framework (SOF) for Integrated Care Systems includes metrics in relation to antimicrobial prescribing: These metrics reflect ones previously included in the NHS Outcomes Framework.

To align with the UK AMR National Action Plan ambition of reducing community antibiotic prescribing by 25% by 2024 the target for primary care antibiotic prescribing has been adjusted within this financial year to 'at or below 0.871'.

SOF Indicator	AMR Metric Description	Target
44a	The number of antibiotic (antibacterial) items prescribed in primary care, divided by the item-based Specific Therapeutic group Age-Sex related Prescribing Unit STAR-PU per annum.	At or less than 0.871
44b	The number of broad-spectrum antibiotic (antibacterial) items from co-amoxiclav, cephalosporin class and fluoroquinolone class drugs as a percentage of the total number of antibacterial items prescribed in primary care.	At or less than 10%

Please help consolidate the improvements made in recent years to antibiotic prescribing and minimise selection pressure for antimicrobial resistance (AMR) by the continued prudent prescribing of antibiotics.

> Ref: Overview | COVID-19 rapid guideline: managing COVID-19 | Guidance | NICE NHSE/NHSI Letter 22/9/21- Antimicrobial Prescribing Metrics for 21/22

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