An audit on outpatient parenteral antimicrobial therapy (OPAT) for diabetic foot infections, in terms of outcomes and cost effectiveness

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Background:

Diabetic foot infection is becoming a Total patients 306 and very common complication in diabetic population Failed OPAT = 14% with high risk of morbidity, mortality SOPAT was observed in 3.5% of the patients and lower extremity amputation.

Objective:

to assess frequency of diabetic foot infection presenting to our outpatient antimicrobial parenteral therapy(OPAT) services in UHL from year of 2022 and to evaluate effectiveness, outcomes and cost savings with OPAT services.

Methods:

Data was collected retrospectively from OPAT patients enrolled at UHL in year of 2022.

Results: dreadful DFI = 58

vascular

15%

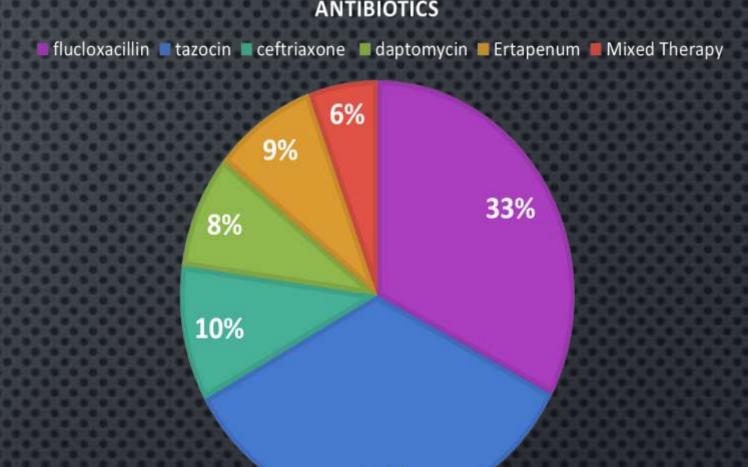
Discussion:

MSSA REFFERING SPECIALITY MRSA GIM G surgery orthopedics 2% 4% proteus 9% 7% 9% 79%

10%

After a year, the service resulted in 993 beds saved through the provision of OPAT only for the patients with diabetic foot infection. 14 % of patients were permanently terminated OPAT due to readmission requiring surgical intervention.





34%

MICROBIOLOGY

streptococcus

- enterococcus
- pseudomonas A mixed

42%

7%



Conclusion:

Overall, OPAT is being found to be a safe, practical and cost effective approach in management of diabetic foot infection and found to be best alternative to long term hospital admission saving intravenous antibiotics and sparing the hospital resources. OPAT limits exposure to nosocomial pathogens. Self administration is low so we should promote more in future for suitable patients.

Keywords

Outpatient antibiotic therapy (OPAT) in DFI(diabetic foot infection)

