

Proclamation of OPAT, medium for treatment revelation

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INTRODUCTION

Outpatient Parental Antimicrobial Therapy (OPAT) was first introduced 2011 by the publication of National Guidelines. It was first developed in 1970s in the treatment of cystic fibrosis. OPAT **enables patient for early discharge or avoiding admissions**. It has been shown to be **safe and also cost-effective** whereby covered by medical professionals, nursing and pharmacist input. OPAT is much regulated by the National Clinical Lead for OPAT and Community Intervention Teams. It is usually comprised of Infectious Diseases Physicians/ Clinical Microbiologists with OPAT nurse and Programme Manager.

In OLOL Drogheda, OPAT is much under the surveillance of the Infectious Diseases (ID) team led by our two ID consultants, with assistance from our microbiology colleagues. Many patients have been under the OPAT service where most patients come from surgical / orthopaedic mostly but there are also significant numbers from other speciality.

Our OPAT team covers a broad amount of region ranging from Co. Meath, Co. Louth, Co. Monaghan and Co. Cavan and some parts of North Dublin as well. An audit was conducted from July 2023 to June 2024 to look into patient's satisfaction with our OPAT service and to see if the services are much at par with the National Guidelines on the Provision of Outpatient Parental Antimicrobial Therapy (OPAT).

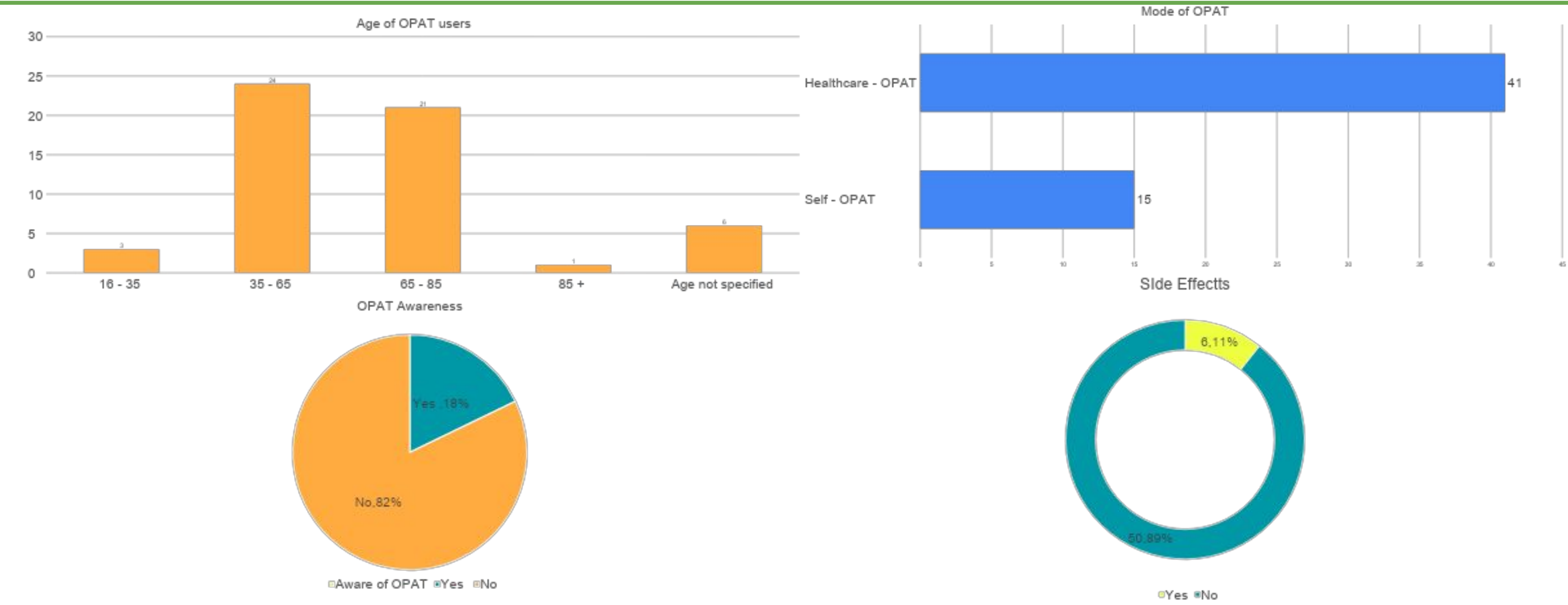
METHOD

77 patients were identified from July 2023 to June 2024. The data was then cleaned for analysis whereby duplicates were removed from the list (ie patient who received OPAT more than once during this period). Data was further cleaned by removing patient who passed away or are not able to give feedback (due to not able to reach patient's mobile number. This is because the feedback is warranted directly from patient who were undergoing OPAT at that point.

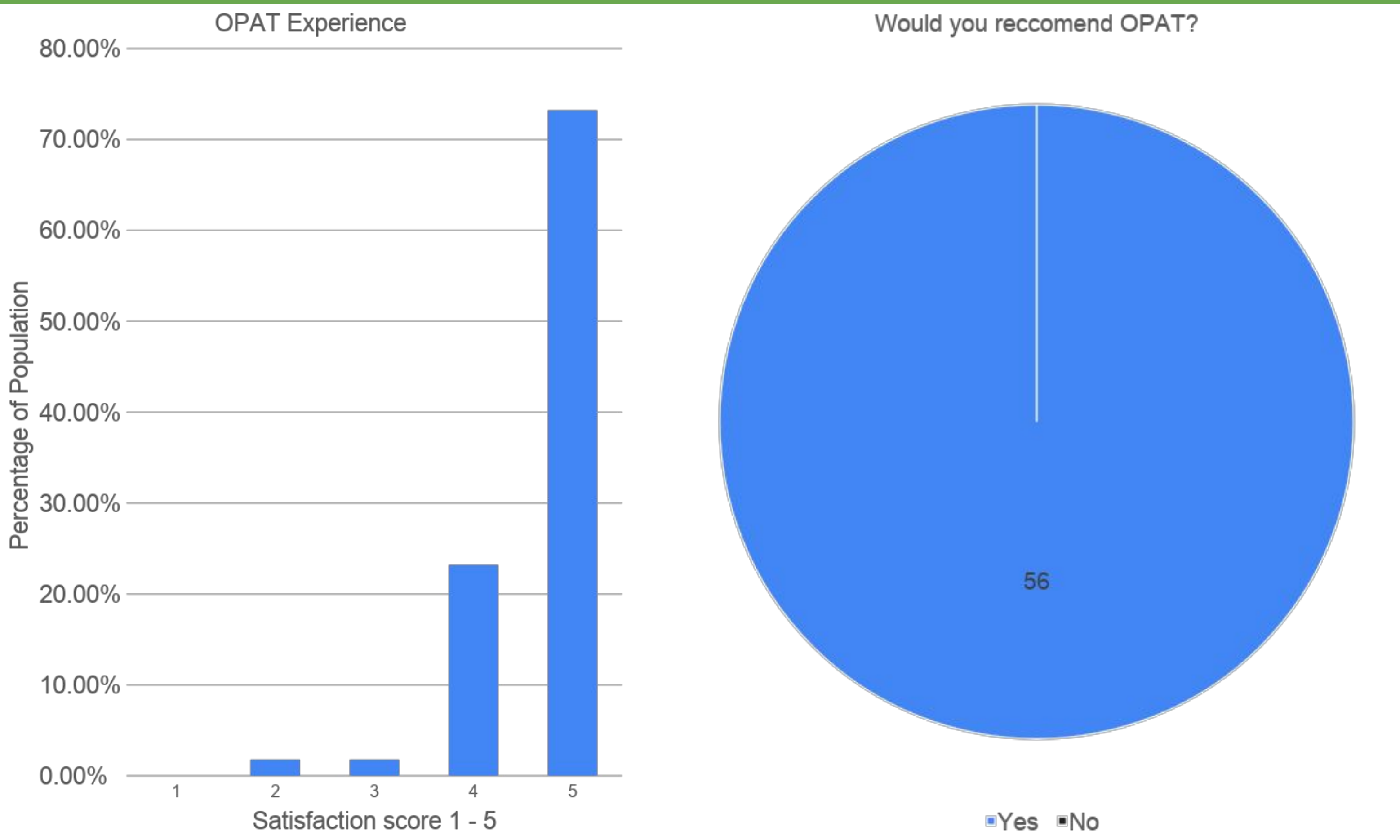
A total of 56 patients were identified in total after data cleaning. A questionnaire was then developed by the ID OPAT team. A phone call was made to all 56 patients and they were asked accordingly to the questionnaire.

The retrieved data is then keyed into Microsoft Excel and data was the tabulated into graphs/pictograms for better visualization of how OLOL Drogheda OPAT treatment faired in patients ranging from patients' demographics and patients' satisfaction with the OPAT service.

RESULTS



RESULTS



DISCUSSION

Findings from the audit showed that most patients are satisfied with the OPAT service despite having to come for weekly appointment. Most patients would prefer to be on OPAT if they are fit as they can receive antibiotics at home but most of them are unaware of the service at all. Things to improve will be more on the waste/ yellow bin collection that seemed to be a common theme amongst patients.

Due to the fact that OLOL has broad coverage, we had to utilise the usage of virtual appointments as travelling is a big issue for many patients especially those who comes from Co. Monaghan and Co. Cavan. In some cases, we prioritize patients to go respite to facilitate patients who are being treated under OPAT. This is mostly in patients post-operative who needs rehab whilst being on OPAT treatment.

OPAT has without doubt should be the go-to treatment for patients who are fit and fulfills the criteria as per the national guidelines. We have also aimed for early oral switch for patients who are on OPAT as per the OVIVA trial which showed that oral treatment is non-inferior to parenteral treatment however this needs to further looked into.

References :

- Irish National Guidelines on the Provision of Outpatient Parenteral Antimicrobial Therapy (OPAT)
- Oral versus Intravenous Antibiotics for Bone and Joint Infection (OVIVA)
<https://www.nejm.org/doi/full/10.1056/NEJMoa1710926>