

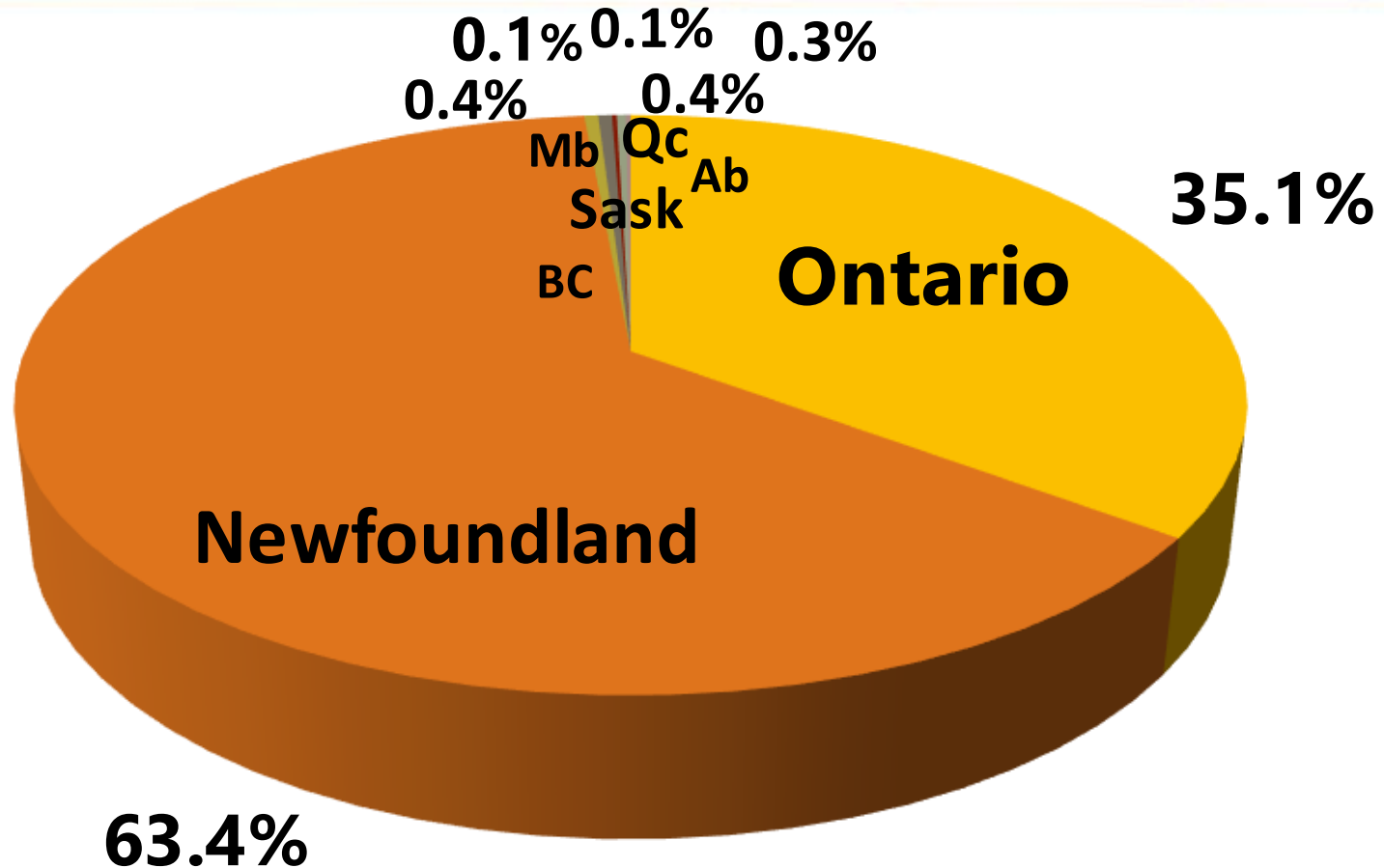
CLEAR: **(Canadian LEadership on Antimicrobial Real-life Usage) Registry**

Final Analysis of IV Amoxicillin/Clavulanate Usage in Canada

IV Amoxicillin/Clavulanate:

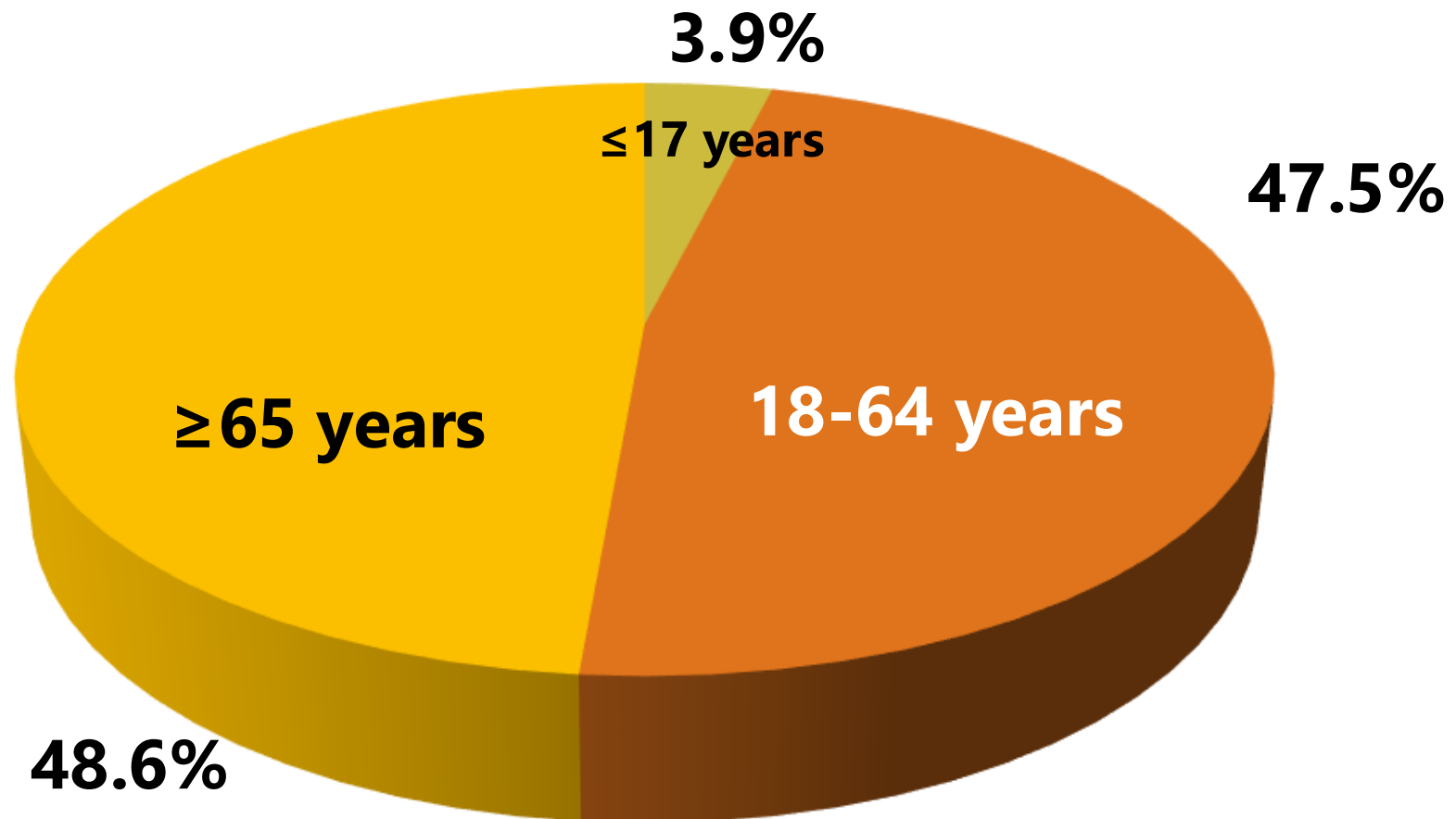
<https://rcsurvey.radyfhs.umanitoba.ca/surveys/?s=HH3RKLXJNCFDEHA9>

IV Amoxicillin/Clavulanate Reports by Province CLEAR (n=690):



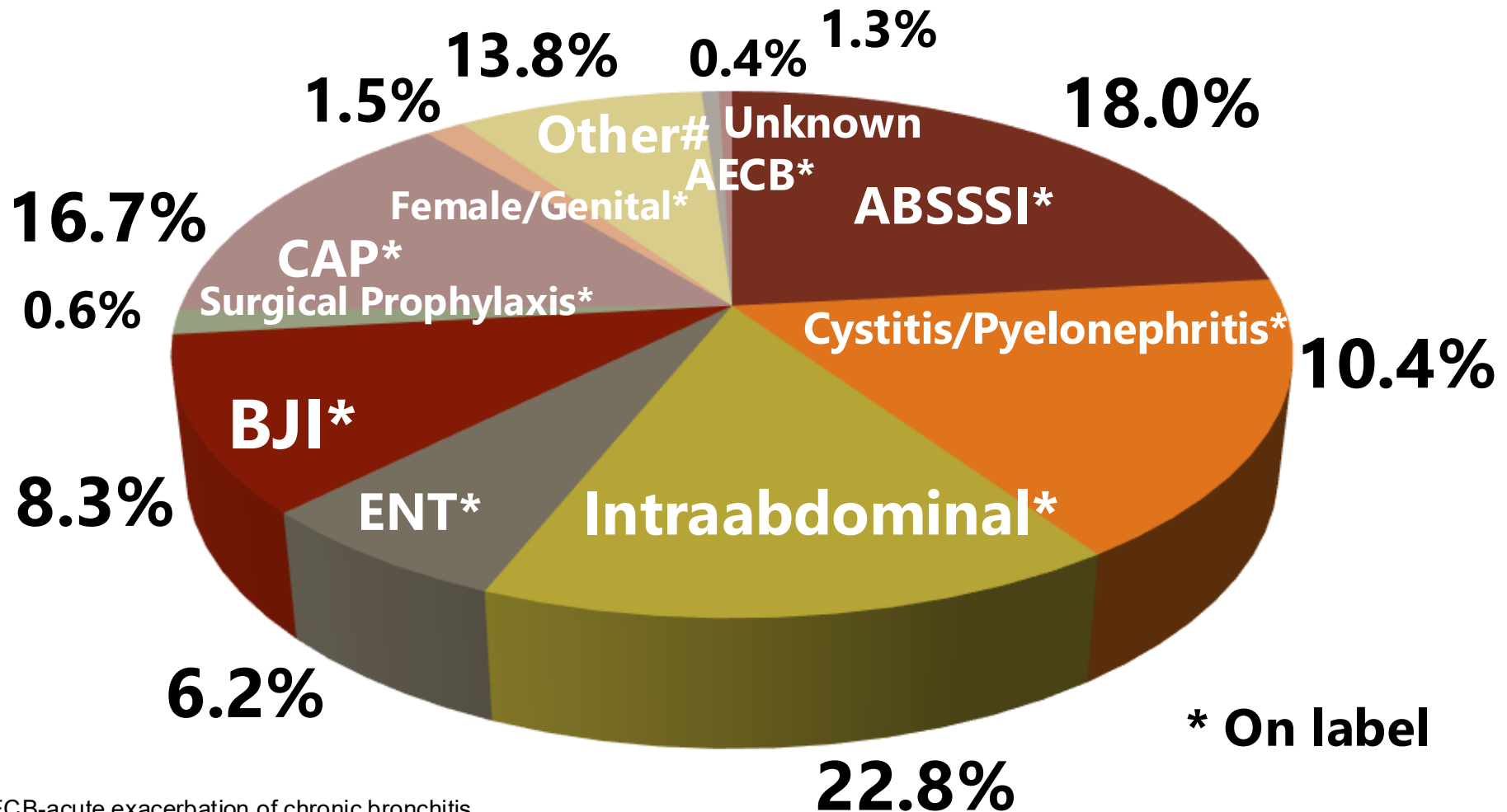
CLEAR (n=690): IV Amoxicillin/Clavulanate

Age of Patients



CLEAR (n= 690):

IV Amoxicillin/Clavulanate Infections Treated



AECB-acute exacerbation of chronic bronchitis

ABSSSI-acute bacterial skin and skin structure infection

BJI-bone and joint infection; CAP-community acquired pneumonia

#-Other (includes aspiration pneumonia, hospital acquired pneumonia, effusion/empyema, bacteremia/sepsis, *Helicobacter pylori*, abscess)

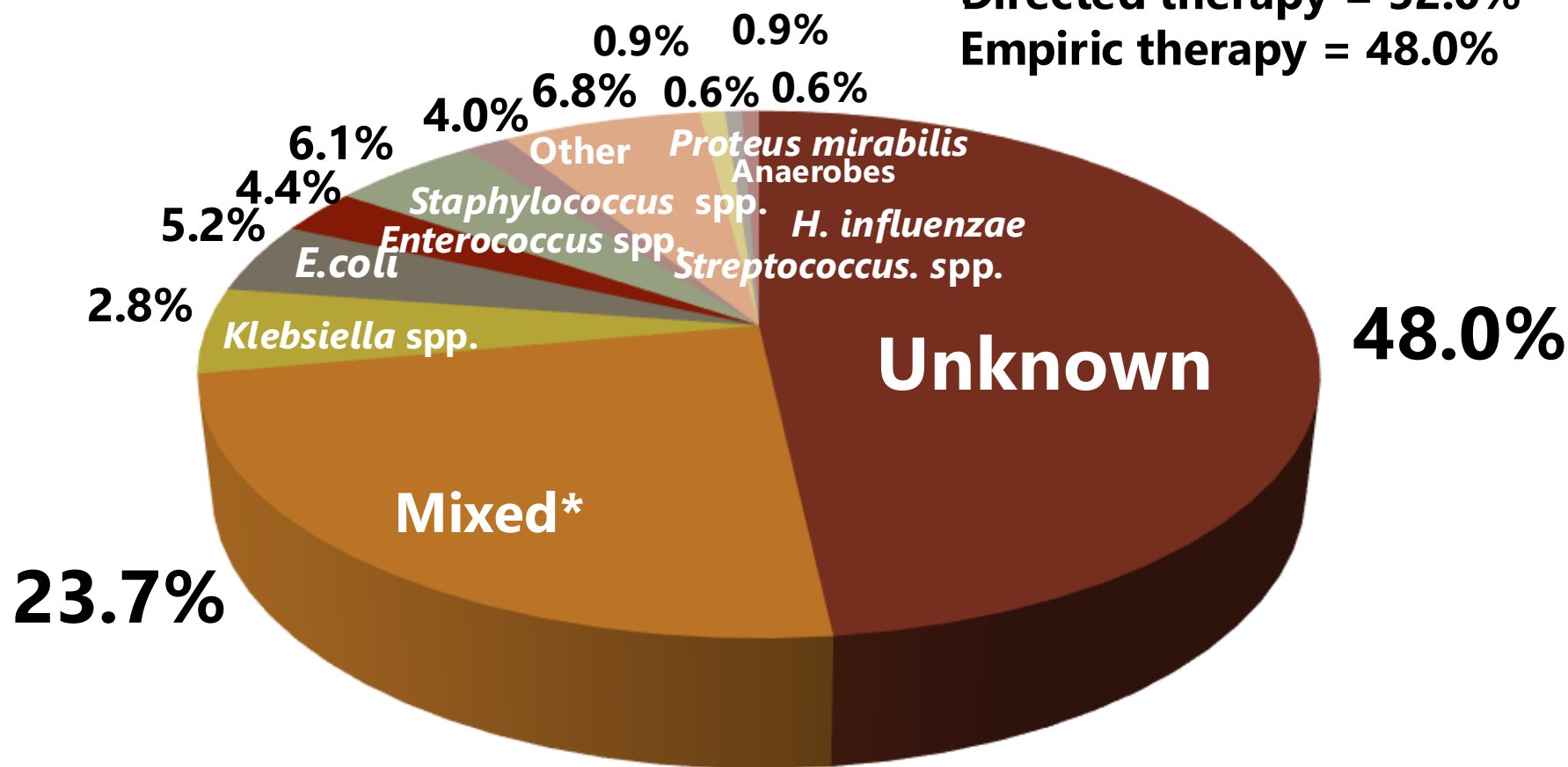
CANADIAN ANTIMICROBIAL
RESISTANCE ALLIANCE



CLEAR (n= 690):

IV Amoxicillin/Clavulanate Pathogens Treated

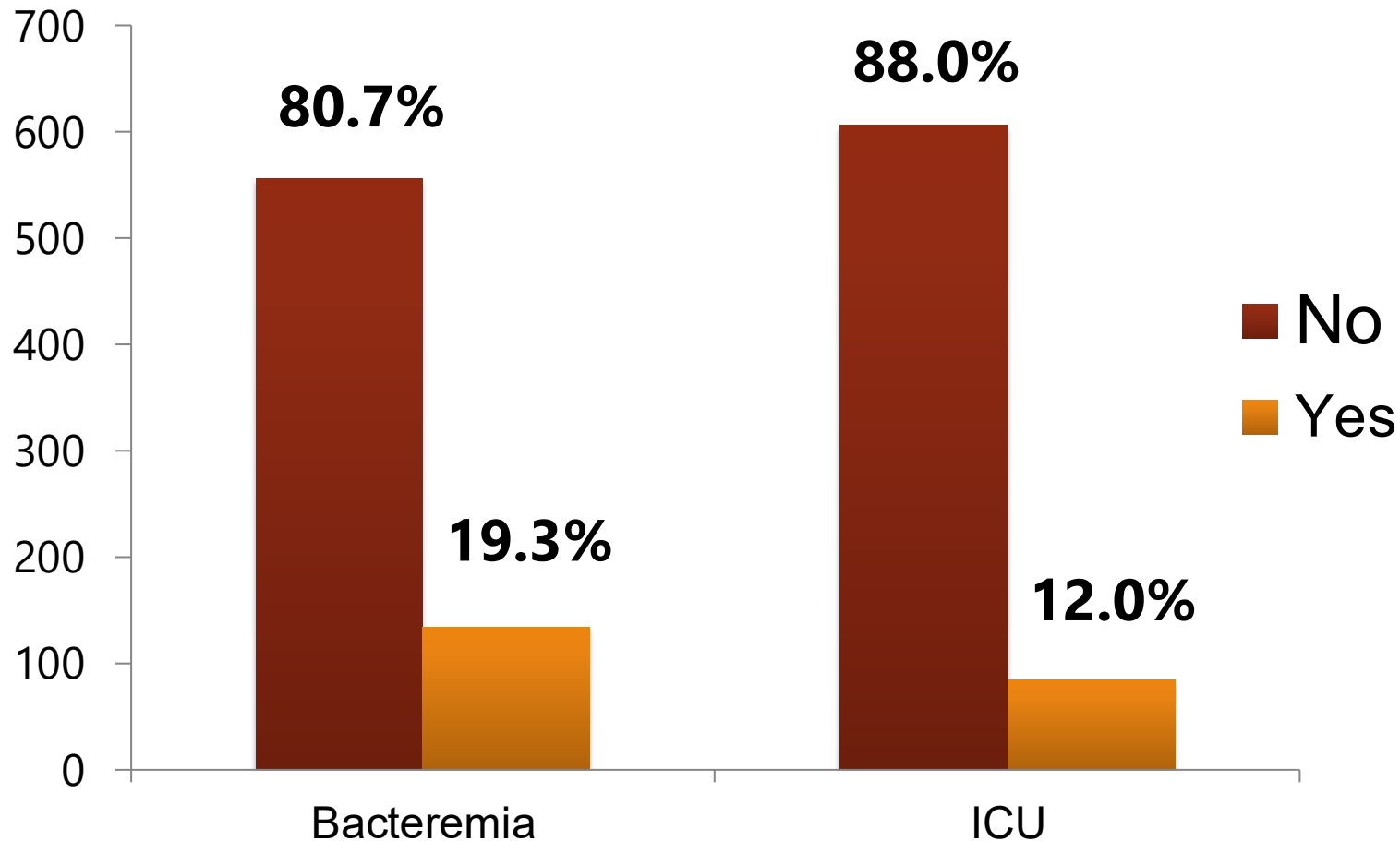
Directed therapy = 52.0%
Empiric therapy = 48.0%



Mixed: included 2 or more gram-negatives, or gram-positives or anaerobes or mixed gram-negatives/gram positives

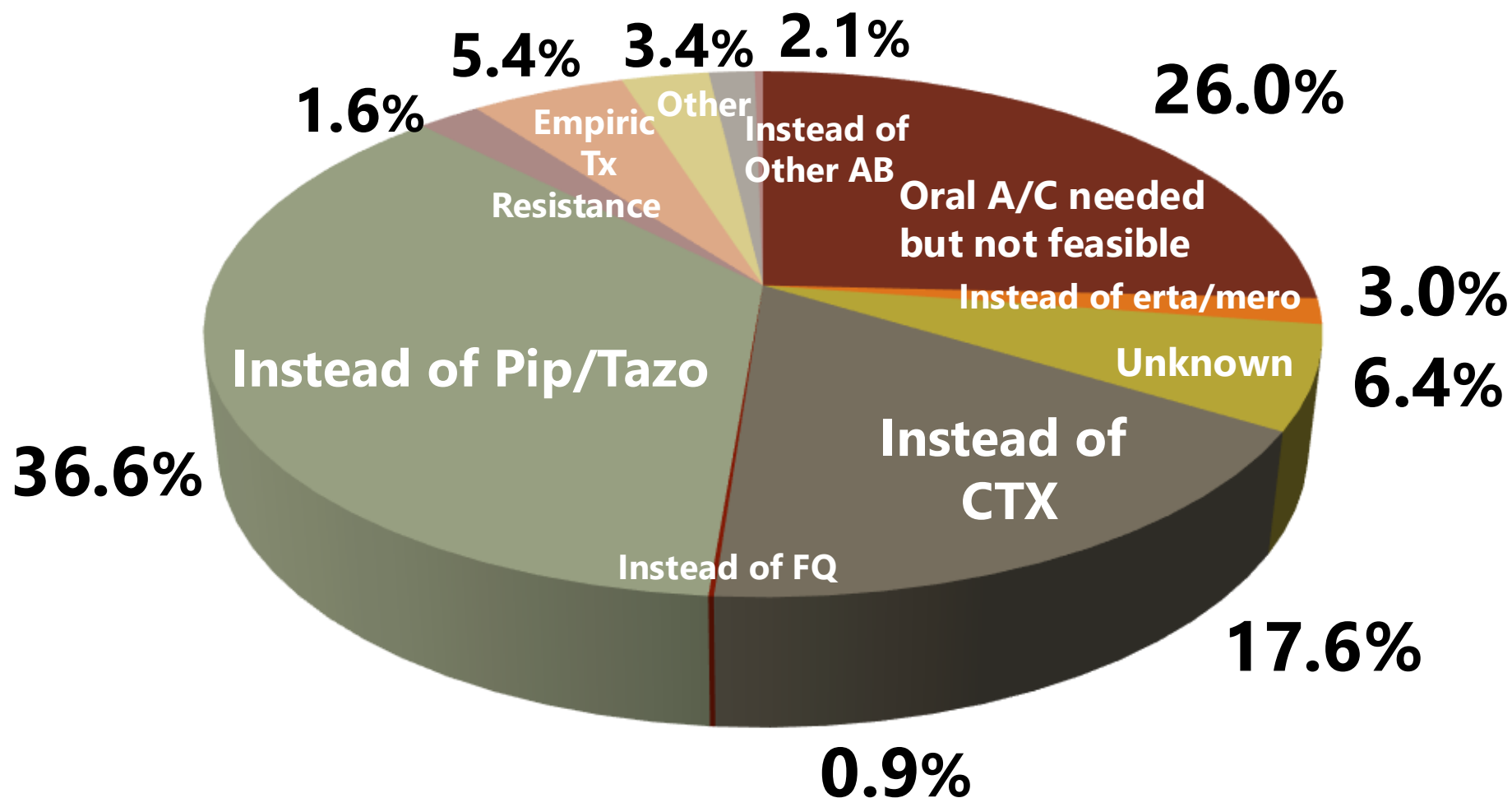
CLEAR (n= 690): IV Amoxicillin/Clavulanate

Was Patient Bacteremic or in the ICU ?



CLEAR (n= 690): IV Amoxicillin/Clavulanate

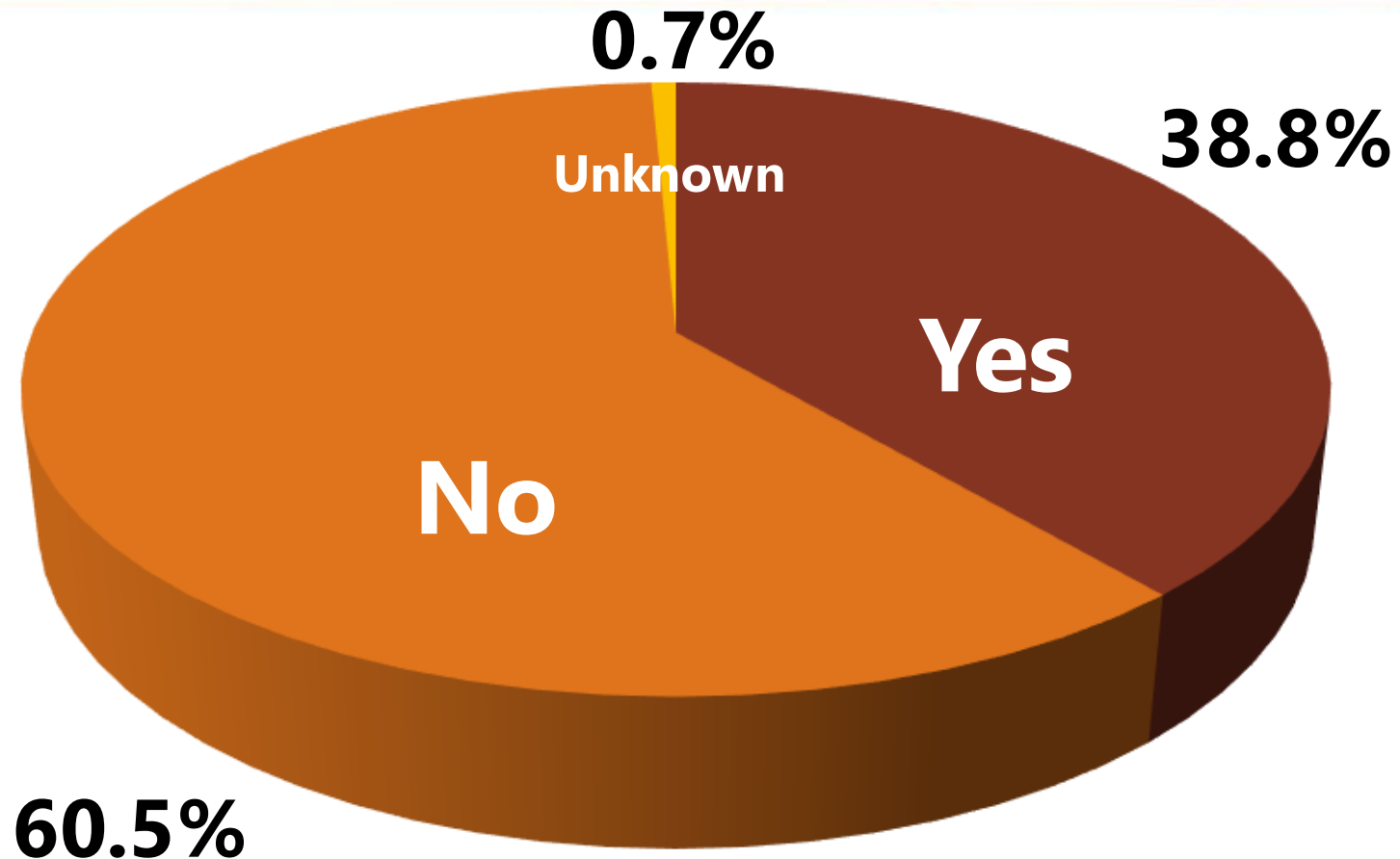
Why Was It Used ?



Instead of other antibiotics (eg. cefazolin/gentamicin, cefazolin, cefazolin/metronidazole, meropenem/vancomycin, gentamicin/clindamycin)

CLEAR (n= 690): IV Amoxicillin/Clavulanate

Was IV Amox/Clav Susceptibility Testing Performed ?



Automated AST = 5; Etest = 1 (MIC 1ug/ml).

CLEAR (n= 690): IV Amoxicillin/Clavulanate

How Was IV Amox/Clav Dosed / Infused ?

# (%) of Patients	IV Amox/Clav Dose
471 (68.4%)	1000mg/200mg Q8H
10 (1.5%)	1000mg/200mg Q12H
34 (4.9%)	2000mg/200mg Q12H
62 (9.0%)	2000mg/200mg Q8H
49 (7.1%)	500/100 Q12H
10 (1.5%)	500/100 Q8H
24 (3.5%)	500/100 Q24H
4 (0.6%)	25mg/kg Q8H
25 (3.6%)	Other

Creatinine clearance measured in 97.1% (669/689) patients

Infusion time:

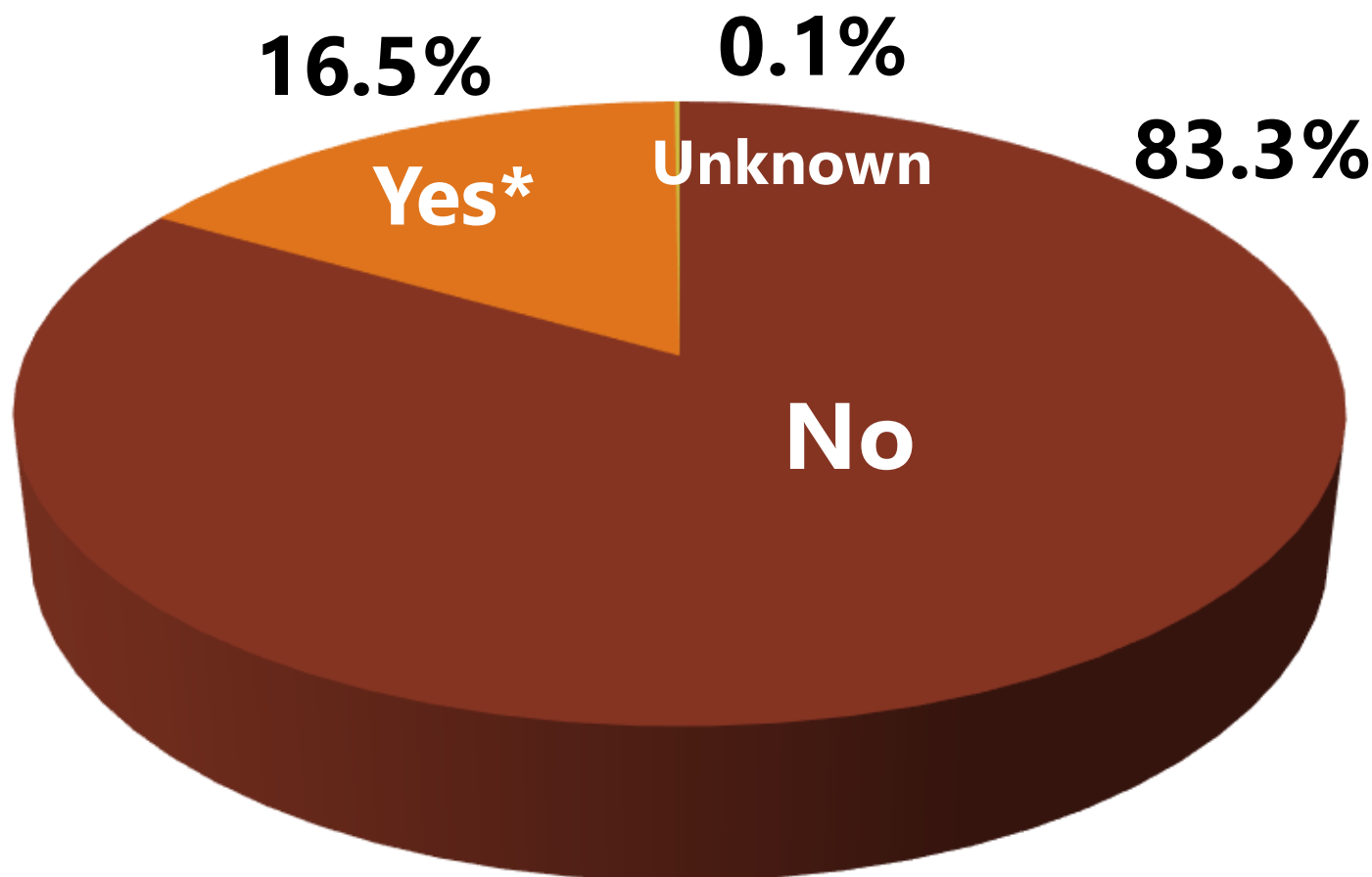
- short (3 min – 1 hour) 100% (689/689)

CANADIAN ANTIMICROBIAL
RESISTANCE ALLIANCE



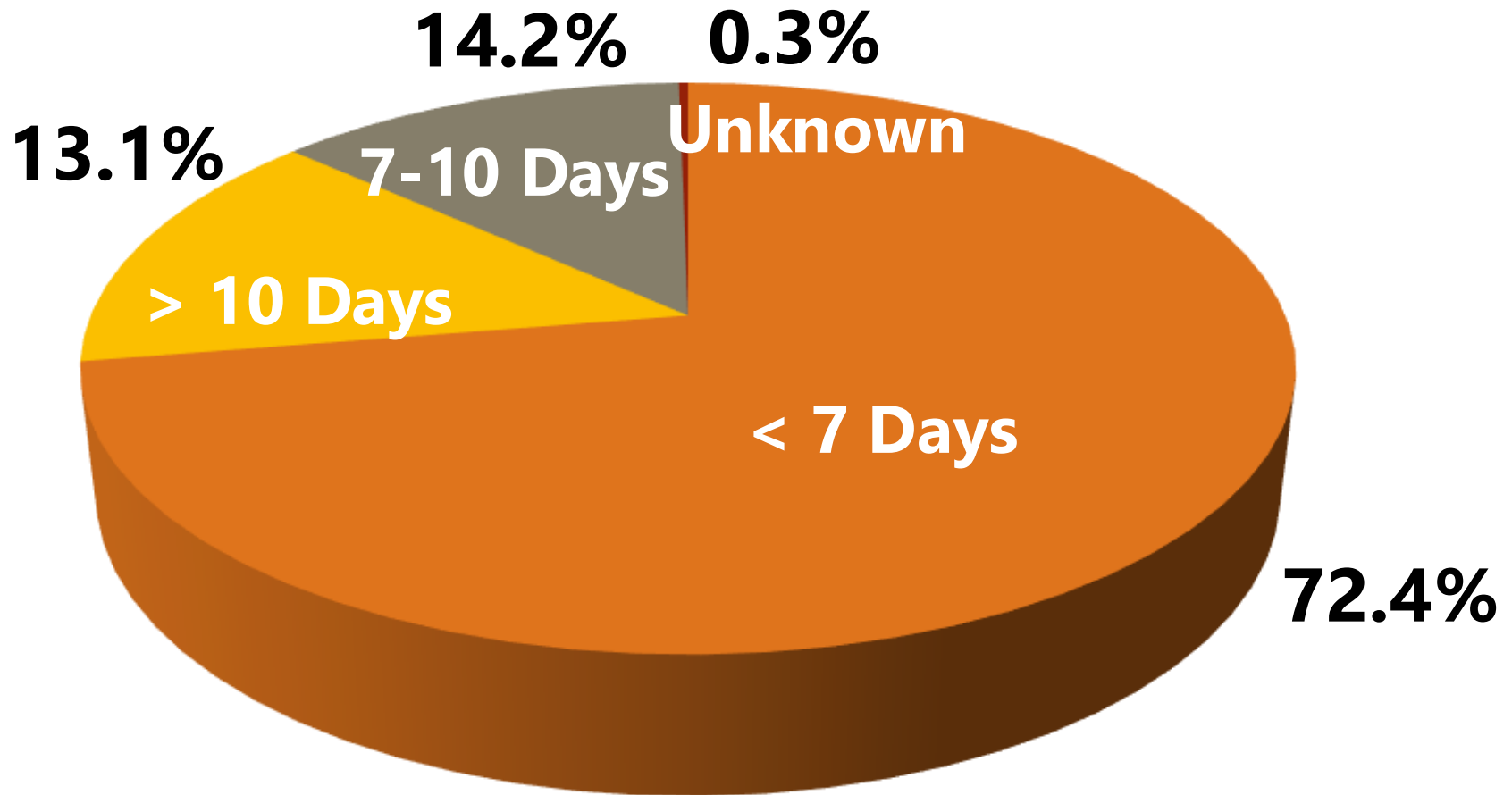
CLEAR (n= 690): IV Amoxicillin/Clavulanate

Was IV Amox/Clav Used Along With Another Antibiotic ?

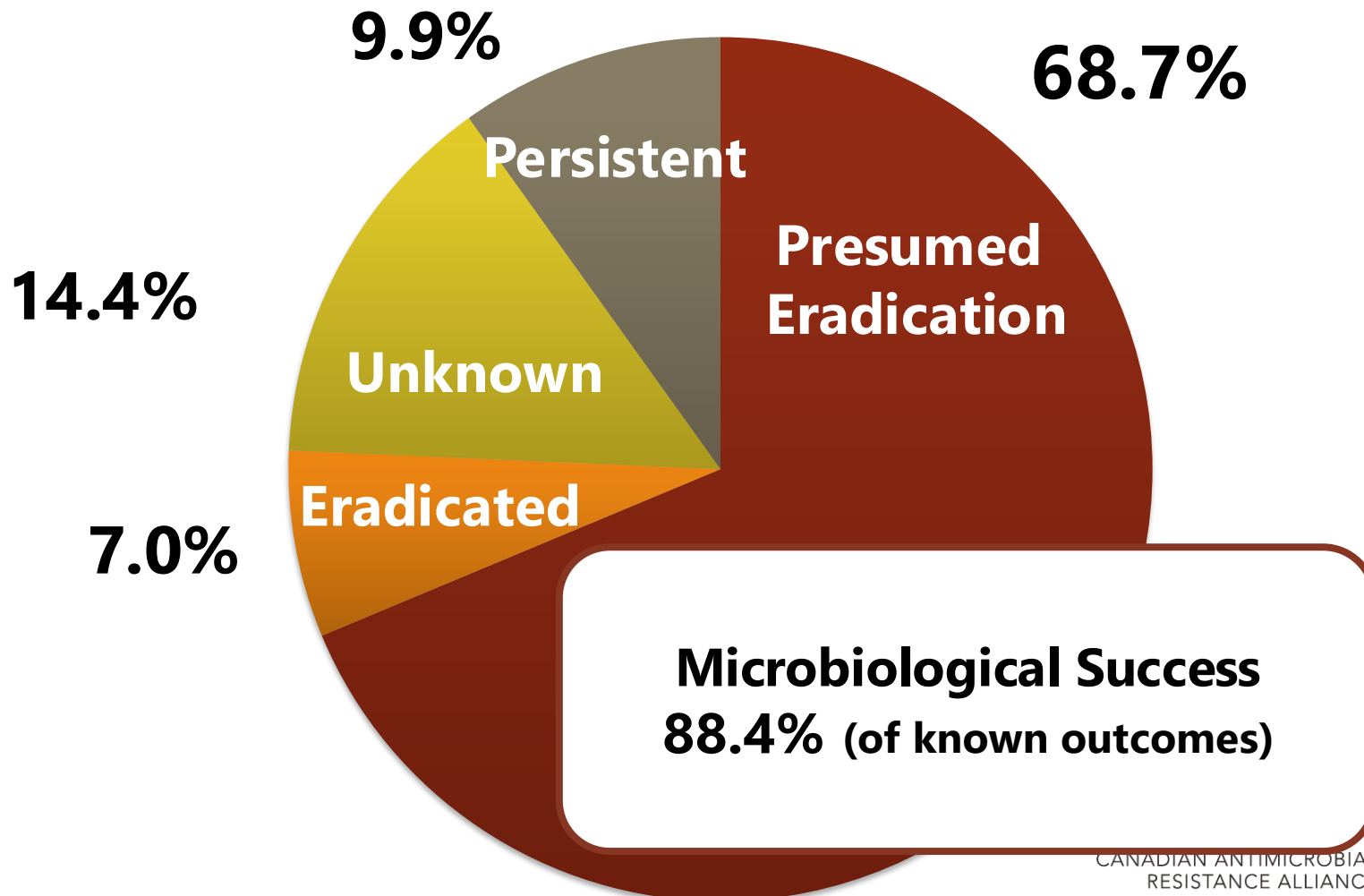


CLEAR (n= 690): IV Amoxicillin/Clavulanate

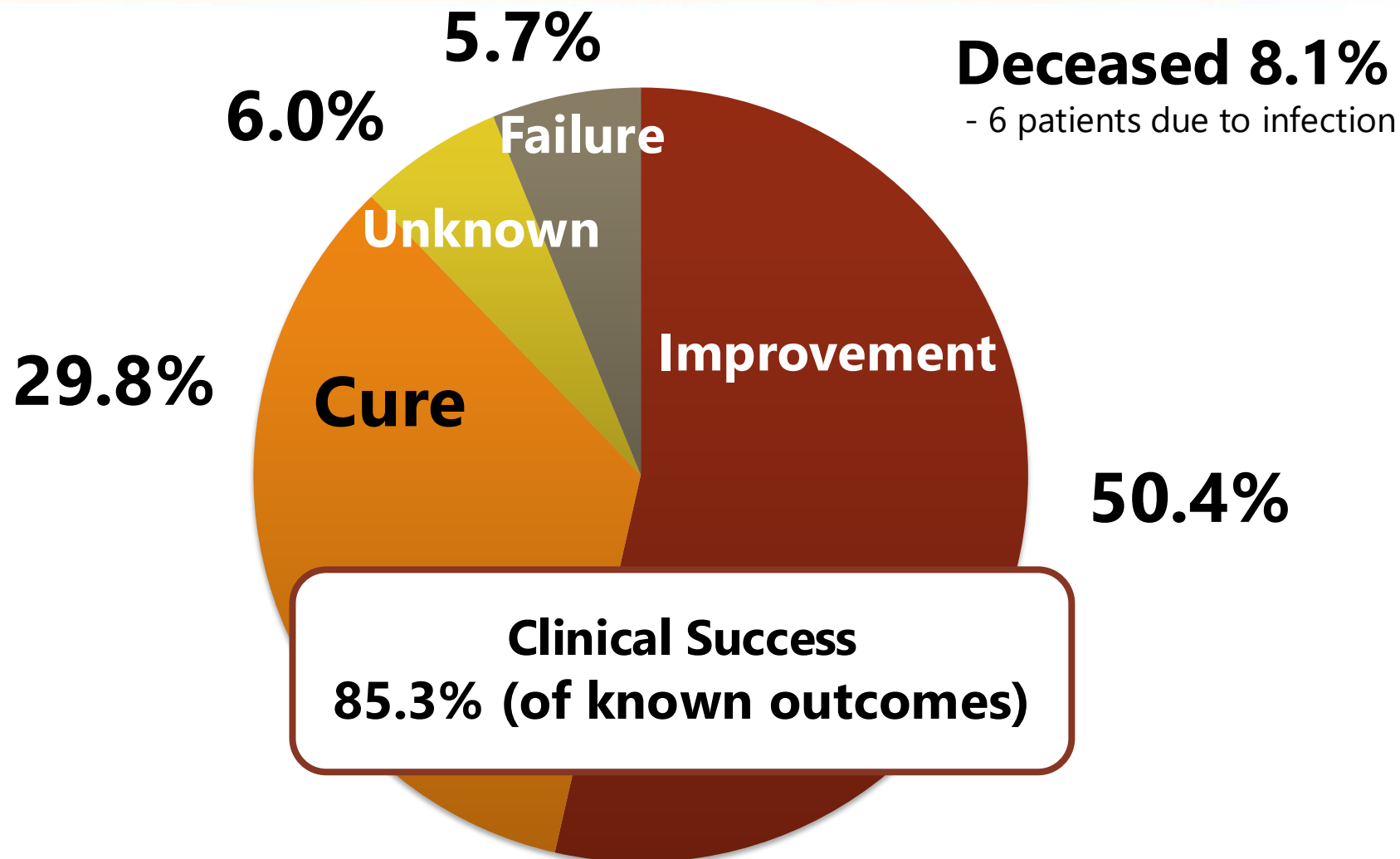
Duration of Treatment



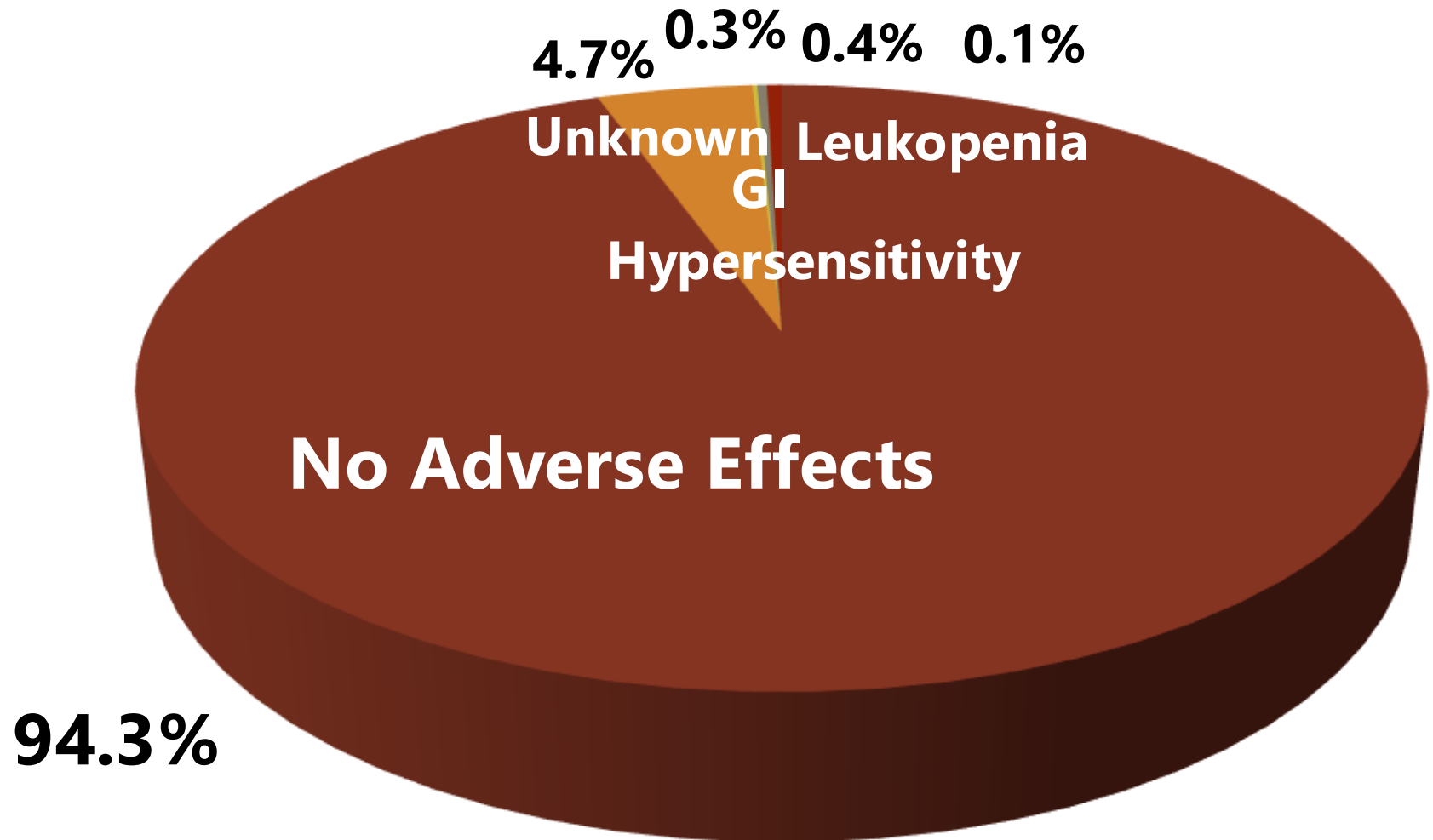
CLEAR (n= 690): IV Amoxicillin/Clavulanate Microbiological Outcome



CLEAR (n= 690): IV Amoxicillin/Clavulanate Clinical Outcome



CLEAR (n= 690): IV Amoxicillin/Clavulanate Adverse Effects



Rash x 2; leukopenia x 1 and gastrointestinal- GI x 2...none resulted in drug discontinuation

Conclusions – CLEAR IV

Amoxicillin/Clavulanate

1. Amoxicillin/Clavulanate is used to treat a variety of infections including intraabdominal, ABSSSI, bone and joint, cystitis/pyelonephritis, community-acquired pneumonia
2. Amoxicillin/Clavulanate is used both as directed and empiric therapy frequently to treat unknown pathogens or mixed infections
3. Amoxicillin/Clavulanate is used instead of piperacillin/tazobactam or ceftriaxone or other antibiotics, when oral amoxicillin/clavulanate is required but not feasible or as empiric therapy
4. Amoxicillin/Clavulanate is used mostly without antimicrobial susceptibility testing

Conclusions – CLEAR IV Amoxicillin/Clavulanate

5. Amoxicillin/Clavulanate is used alone though at times combined with other antibiotics including vancomycin, azithromycin, ciprofloxacin/levofloxacin, doxycycline
6. The most common IV dosage administered is 1000/200mg Q8H (all with a short infusion- 3min-1hour)
7. Amoxicillin/Clavulanate treatment is associated with high rates of microbiological and clinical success
8. Only 0.8% of patients reported an adverse effect, none resulting in drug discontinuation

CLEAR: **(Canadian Leadership on Antimicrobial Rea-life Usage) Registry**

Become a CLEAR participant (ggzhanel@pcsinternet.ca)

The CLEAR registry is live, participants receive an email periodically (every 3-4 months) of the most current data as well as links to the **current** registry (eg. **CLEAR - IV Ceftobiprole ENDOCARDITIS, IV Meropenem/Vaborbactam and Pediatric IV Fosfomycin**) so that interested ID/MM physicians and ID/Antimicrobial Stewardship pharmacists can enter patient data (prospective or retrospective)

Ceftobiprole ENDOCARDITIS: <https://rcsurvey.radyfhs.umanitoba.ca/surveys/?s=JM8JJHLA8N3JDKWA>

IV Meropenem/Vaborbactam: <https://rcsurvey.radyfhs.umanitoba.ca/surveys/?s=3H4FJ7HA49MDYHY8>

PEDIATRIC IV fosfomycin... <https://rcsurvey.radyfhs.umanitoba.ca/surveys/?s=FYHJNY4CRLJFN8DL>