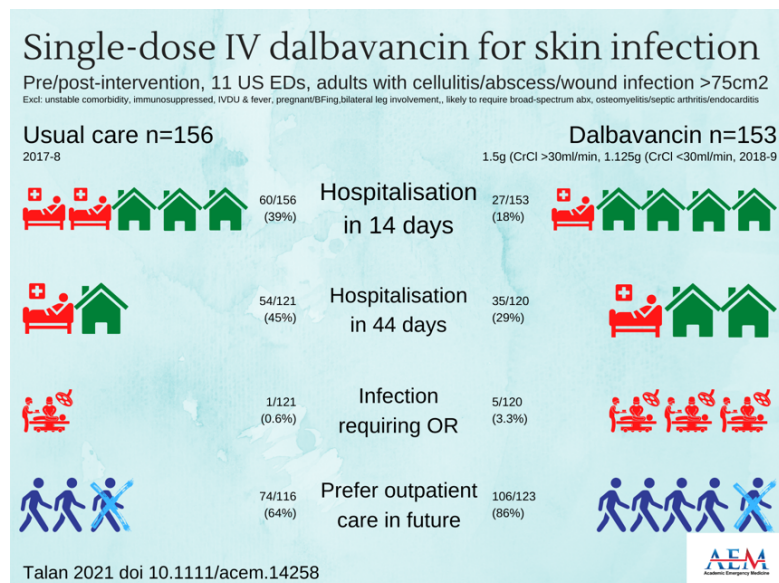


October 2021

Antibiotic Reduces Hospitalizations of Patients With Skin Infections

Des Plaines, IL – Implementation of an emergency department skin and soft tissue infection clinical pathway for patient selection and follow-up that included use of a single-dose, long-acting IV antibiotic was associated with a significant reduction in hospitalization rate for stable patients with moderately severe infections. This is the conclusion of a study titled [Pathway With Single-Dose Long-Acting Intravenous Antibiotic Reduces Emergency Department Hospitalizations of Patients With Skin Infections](#), published in the October issue of Academic Emergency Medicine (AEM), a peer-reviewed journal of the Society for Academic Emergency Medicine (SAEM).



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Emergency department patients often are challenged to have good adherence to an oral antibiotic regimen or lack resources that promote a care strategy that requires frequent follow-up visits. The [study](#) points out that the relatively recent introduction of single-dose IV antibiotic treatments for patients with skin infections ensures that patients receive not only non-oral treatment but also a full course of treatment. This creates more successful outcomes and can prevent future emergency department visits and hospital admissions.

The lead author of the study is David A. Talan, MD, professor of medicine at the Ronald Reagan UCLA Medical Center, David Geffen School of Medicine at the University of California at Los Angeles.

Study details and results are discussed with Dr. Talan in a recent AEM podcast titled [Take the Long Med Home – for Cellulitis](#).

Commenting on the study is Christopher Graber, MD, MPH, professor of clinical medicine at the David Geffen School of Medicine at UCLA, medical director of the antimicrobial stewardship program at the VA Greater Los Angeles Healthcare System, and program director of the UCLA Multicampus Fellowship in Infectious Diseases. His research interests lie in provision of cognitive support for antimicrobial stewardship.

“This study highlights the role that establishing a clinical pathway to administer long-acting injectable antibiotics can play in reducing hospitalization for patients seen in the emergency department for skin and soft tissue infection. The key in clinical management is careful determination that patients for whom this pathway is being considered have a severe enough presentation or other clinical factors to warrant intravenous therapy while not requiring observation for potential surgical intervention.”

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ABOUT ACADEMIC EMERGENCY MEDICINE

Academic Emergency Medicine, the monthly journal of Society for Academic Emergency Medicine, features the best in peer-reviewed, cutting-edge original research relevant to the practice and investigation of emergency care. The above study is published open access and can be downloaded by following the [DOI link: 10.1111/acem.14258](https://doi.org/10.1111/acem.14258). Journalists wishing to interview the authors may contact Tami Craig at tcraig@saem.org.

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