

MY TOP 5 TAKES ON

Catheter-related bloodstream infections with coagulase-negative staphylococci (CONS):

Are antibiotics necessary if the catheter is removed?



CONS LEADS THE PACK

One in every 2 (~57%) cases of catheter related BSI (CRBSI) were due to CONS based on a report (ref 3). **Reason:** CONS are the most common skin commensal.



5-7 DAYS THERAPY

AFTER removal of catheter for CONS CRBSI.

Interestingly the guideline also states that some experts recommend no antibiotic at all in patients who remain afebrile and abacteremic post removal. This is tad confusing!



RETROSPECTIVE STUDY

WHO?

Adults ≥ 18 with CONS CRBSI + catheter removal (*Staph lugdenesis* cases were not included)

WHERE?

Bern Hospital, Switzerland

WHEN?

1/1/2008 till 31/12/2016

COMPARISON?

Between those given antibiotic (>5 days) vs. none



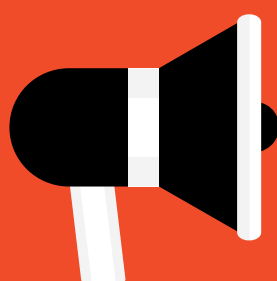
NIL DIFFERENCE

N = 184 with 32 subjects with nil treatment; predominantly male (70%) and median age was 61 (51–67).

96% were HA-CRBSI!!!

NIL DIFFERENCE between the groups who received > 5 days of antibiotic vs. none at all.

(Propensity score with NN was used to reduce bias)



ANTIBIOTICS ARE NOT NEEDED FOR CONS CRBSI AFTER CATHETER IS REMOVED

In non neutropenic patients.

(suggested by this study)