



Northern Health Physicians Partners in Wellness

Public Health Newsletter for Northern Health Physicians
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Antimicrobial Stewardship Program- Managing uncomplicated skin and soft tissue infections – preventing hospital admissions

Skin and soft tissue infections are a common reason for physician office and emergency department visits. Depending on the severity at presentation initiation of oral therapy may not be desirable and a few days of intravenous therapy prior to conversion to oral therapy may be required. In attempts to reduce number of admissions, physician often turn to outpatient administration of IV antimicrobials.

Previous practices in NH for outpatient IV management of uncomplicated skin and soft tissue infections (uSSTI) relied on the use of cefazolin plus oral probenecid. In 2011, probenecid was removed from the Canadian Market. At that time, ceftriaxone replaced cefazolin plus probenecid in the outpatient setting for uSSTI. This is not an ideal practice because ceftriaxone has suboptimal activity against *S. aureus*, has a higher risk for developing *C. difficile* infection and provides unnecessary gram negative coverage promoting antimicrobial resistance.

Probenecid (a uricosuric agent that inhibits kidney tubular secretion of cefazolin) given orally prior to a once daily dose of cefazolin 2 g IV has been shown to increase serum concentrations and extend the half-life of cefazolin in a manner that achieves clinical resolution of cellulitis and related soft tissue infections compared to treatment with ceftriaxone 2 g IV daily. Prescribing cefazolin 2 g IV q24h plus probenecid 1 g PO daily 10 to 30 min prior to cefazolin in outpatient treatment settings for uSSTI will minimize use of ceftriaxone for uSSTI in outpatient treatment settings. However there will still be situations that warrant use of ceftriaxone in the outpatient setting (e.g. complicated infections such as: bone and joint infection, endocarditis, moderate/severe diabetic foot ulcers and animal bites).

NH is now able to obtain a compounded product through a Canadian manufacturer in Quebec. These capsules are not available

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via community pharmacies (manufacturer will only sell to hospital pharmacies), therefore NH facilities are required to provide patients with this oral medication daily (when patient returns for cefazolin dose).

Probenecid is contraindicated in patients with renal dysfunction and should not be used in patients with a creatinine clearance (CrCl) of less than 30 mL/min. Patients with CrCl of less than 30 mL/min could be treated with cefazolin at a reduced frequency (see below).

Creatinine Clearance (mL/min)	Cefazolin dosing
10 – 30	Cefazolin 2 g IV q 12h (no probenecid)
Less than 10	Cefazolin 2g IV 24h (no probenecid)
Hemodialysis	Cefazolin 2g IV after dialysis 3x/week (no probenecid)

Points for practice

- Use of cefazolin + probenecid for uSSTI allows sparing of ceftriaxone for more complicated infections and allows for convenient daily dosing for outpatients
- Assess response to initial antibiotic therapy at 3 days and consider conversion to oral therapy
- Keep in mind that an increased redness/extension of cellulitis may occur after initiation of antibiotic therapy (due to release of toxins from bacteria) therefore NOT a reliable marker of clinical status if otherwise improving

Submitted by:

Alicia Rahier, Antimicrobial Stewardship Program Coordinator

The Truth and Reconciliation Commission

The Truth and Reconciliation Commission's report was released in December 2015. The report details 94 Calls to Action (recommendations) for Canadians to redress the legacy of residential schools (Actions 1-42) and advance the process of reconciliation (Actions 43-94). This newsletter series will walk through the 94 Calls to Action to support Northern physicians and other providers to learn about the legacies and take actions towards reconciliation in their practices, relationships, and communities.

The categories to redress the legacy of residential schools include; child welfare, education, language and culture, health, and justice. This issue we highlight 9 Reconciliation Calls to Action. Others will be shared in upcoming newsletters.

To learn more about the Truth and Reconciliation Commission and the Calls to Action, visit <http://nctr.ca/>

Education for reconciliation

62. We call upon the federal, provincial, and territorial governments, in consultation and collaboration with survivors, Aboriginal peoples, and educators, to...

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The Truth and Reconciliation Commission

Education for reconciliation

63. We call upon the Council of Ministers of Education, Canada to maintain an annual commitment to Aboriginal education issues, including ...
64. We call upon all levels of government that provide public funds to denominational schools to require such schools to provide an education on comparative religious studies, which must include a segment on Aboriginal spiritual beliefs and practices developed in collaboration with Aboriginal elders.
65. We call upon the federal government, through the Social Sciences and Humanities Research Council, and in collaboration with Aboriginal peoples, post-secondary institutions and educators, and the National Centre for Truth and Reconciliation and its partner institutions, to establish a national research program with multi-year funding to advance understanding of reconciliation.

Youth Programs

66. We call upon the federal government to establish multi-year funding for community-based youth organizations to deliver programs on reconciliation, and establish a national network to share information and best practices.

Museums and Archives

67. We call upon the federal government to provide funding to the Canadian Museums Association to undertake, in collaboration with Aboriginal peoples, a national review of museum policies and best practices to determine the level of compliance with the United Nations Declaration on the Rights of Indigenous Peoples and to make recommendations.
68. We call upon the federal government, in collaboration with Aboriginal peoples, and the Canadian Museums Association to mark the 150th anniversary of Canadian Confederation in 2017 by establishing a dedicated national funding program for commemoration projects on the theme of reconciliation.
69. We call upon Library and Archives Canada to fully adopt and implement the United Nations Declaration on the Rights of Indigenous Peoples and the United Nations Joint-Orontlicher principles, as related to Aboriginal peoples' inalienable right to know the truth about what happened and why, with regard to human rights violations committed against them in the residential schools, and ...
70. We call upon the federal government to provide funding to the Canadian Association of Archivists to undertake, in collaboration with Aboriginal peoples, a national review of archival policies and best practices to ...

Submitted by: **Dr. Sandra Allison**, Chief Medical Health Officer

Do you have an idea for a newsletter?

Please send any suggestions or articles to:

NHPhysiciansNewsletter@northernhealth.ca

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<http://physicians.northernhealth.ca/physicianResources/PublicHealth.aspx>

