

Wales UTI QI – Review of urinary prophylaxis 2019/20



PHW UTI Standard 8¹ - ... review the patient every 6 months to reduce risk of increased antimicrobial resistance



Proportion of people prescribed urinary prophylactic antibiotics for more than 6 months who have had a documented prophylaxis review in the last 6 months



Number of never events per number of people taking urinary prophylaxis

- (i) antibiotic issued for a suspected acute infection which the person is already taking as prophylaxis
- (ii) MSU shows resistance to prophylactic agent but prophylaxis not stopped/changed



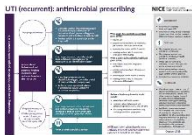
When a trial of daily antibiotic prophylaxis is given, give advice about:

- *the risk of resistance with long-term antibiotics, which means they may be less effective in the future*
- *possible adverse effects of long-term antibiotics*
- *returning for review within 6 months*
- *seeking medical help if there are symptoms of an acute UTI [NICE]*

If a trial without prophylactic antibiotics is appropriate, give self-care advice. Ensure that if symptoms restart

- an MSU is sent (give the person a bottle and form)
- they can rapidly access advice/treatment.

If proven UTIs recur, consider the various management options, including the need for referral- see overleaf

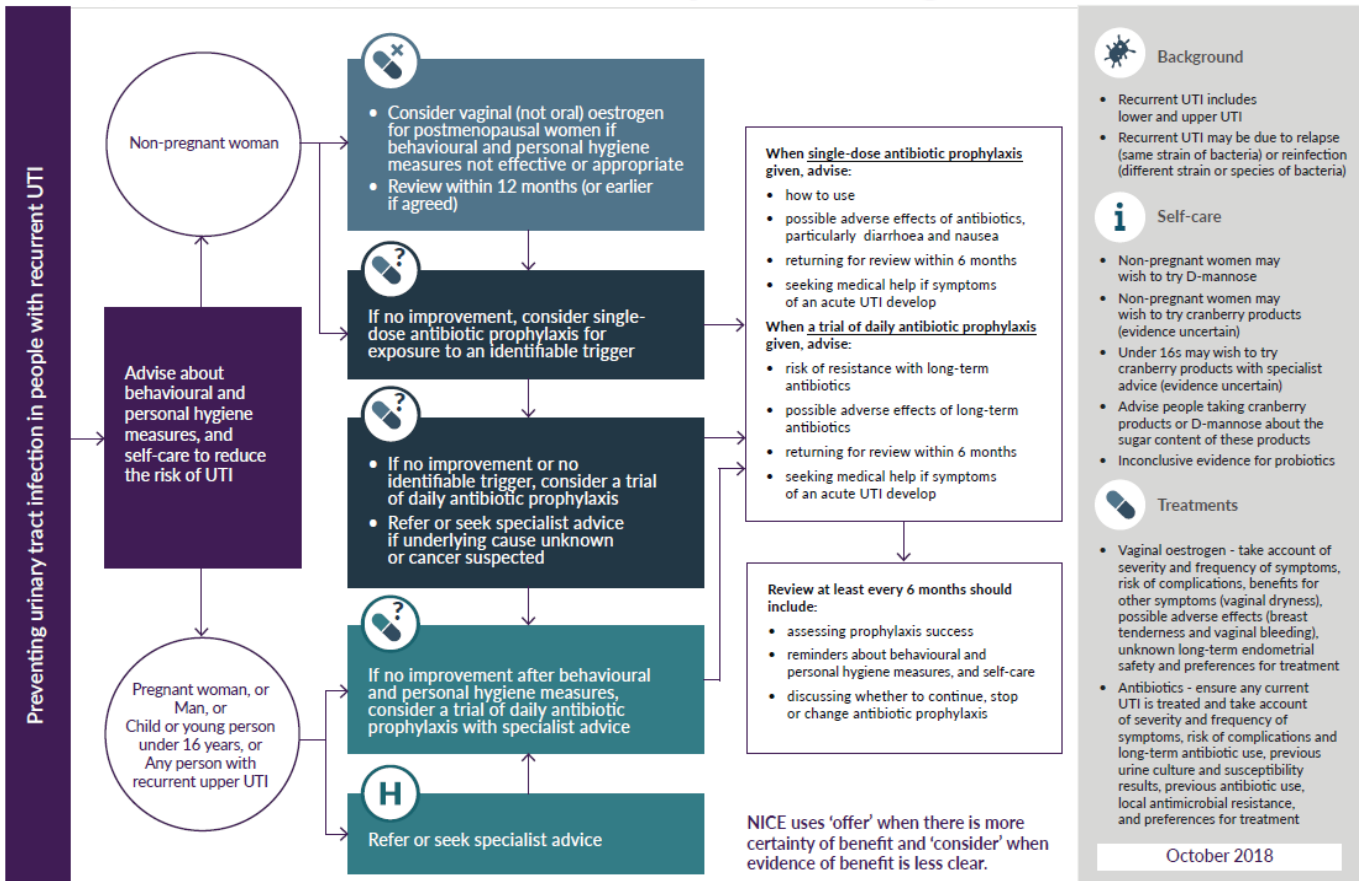


Current practice From Welsh practices covering N=35,000 patients². Data suggests

- *prevalence urinary prophylactic antibiotic prescription = 0.5% practice population*
- *24% people taking prophylaxis for >6 months, had review in previous 6 months*
- *20% prescribed same antibiotic for acute UTI as taking prophylactically*
- *When MSU showed resistance, prophylaxis changed 18% of the time.*
- *At review (initial audit cycle) over 50 % stopped prophylaxis*

¹ PHW UTI 9' Key Standards for UTI Prevention, Treatment and Management Standard

² A review of the management of recurrent urinary tract infection (rUTI) in Primary Care, A Tucker



[NICE NG112 UTI \(recurrent\): antimicrobial prescribing visual summary](#)

Method

Initial data collection may be supported by the Health Board, SWAP or antimicrobial pharmacists. Practices will need to review the data and agree which patients require telephone review and which are most likely to benefit from a face to face assessment.

Identify people prescribed antibiotics for the prophylaxis of recurrent UTI in the last 12 months. The initial search should include trimethoprim 100mg, nitrofurantoin 50mg & 100mg, nitrofurantoin MR 100mg and cefalexin 125mg, 250mg.

Please see Wales UTI QI(3b) Prophylaxis SWAP for further details & data collection sheet

Measures (for cluster report)

- Total number of people prescribed urinary prophylactic antibiotics, % practice population (no target)
- Number of people prescribed urinary prophylactic antibiotics for more than 6 months.
- Proportion of people prescribed urinary prophylactic antibiotics for more than 6 months, who have had a documented prophylaxis review in the last 6 months (For cluster level report)
- Never events
 - antibiotic issued for a suspected acute infection which the person is already taking as prophylaxis
 - MSU shows resistance to prophylactic agent but prophylaxis not stopped/changed
- Number (%) of people reviewed, who successfully stopped prophylaxis