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Compliance with guideline-based empiric antimicrobial therapy for febrile neutropenia in adult Filipino patients and their effect on outcomes

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Background: Febrile neutropenia (FN) is a common complication of immunocompromised patients-whether due to infection, cancer, drug-induced, or other bone marrow failure states. With the incidence of patients with immunocompromised states on the rise, this life-threatening complication is also increasing. The importance of initiating the appropriate empiric antibiotic therapy can prove to be life-saving, thus we examined how the initial choice of antibiotics influenced patient outcomes.

Aim & Design: This study aimed to determine the effect of adherence to guideline-based antimicrobial therapy for adult febrile neutropenia patients in terms of patient outcomes. It was a retrospective cross-sectional analytical study.

Methods: This is a 10-year cross-sectional analytical study which was conducted by doing a retrospective chart review involving adult patients with FN from 2007 to 2016. We determined, use of guideline-based antibiotics, examined the factors that influenced adherence and investigated the effect of initial treatment on patient outcome.

Results: Among the 257 adult patients with FN included in the study, guideline-based antibiotics were administered to 65%. On multivariate analysis, the most powerful predictor of adherence to guideline-based antibiotics was the type of risk ($p=0.000$), with high risk patients thrice more likely to be given guideline-based antibiotics. Other predictors were physician specialty ($p=0.036$) and hematologic malignancy ($p=0.045$). This study showed that among low risk patients with FN, a trend towards patient discharge was observed (OR 1.18, CI=0.16-8.63). However overall, adherence to guideline-based empiric antibiotic in treating adult FN patients did not correlate to patient discharge ($p=0.134$, OR 0.557, 95% CI=0.260-1.205).

Conclusion: In summary, our data suggest that adherence to guideline-based antibiotics in managing adult Filipino patients with febrile neutropenia does not correlate to better outcomes such as patient discharge. Significant factors associated with adherence to guideline-based antibiotics are physician specialty, hematologic malignancy, and type of risk.

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