

# Antibiotic exposure for culture-negative early-onset neonatal sepsis: an international study

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# AENEAS study

JAMA  
Network | **Open**  
2022

Original Investigation | Pediatrics

Analysis of Antibiotic Exposure and Early-Onset Neonatal Sepsis in Europe,  
North America, and Australia

**757'979**

**infants  $\geq$  34 SA**

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## Burden of treatment

- Proportion of treated
- Antibiotic exposure

## Burden of CP-EOS

- Incidence
- Mortality

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## Burden of treatment

- Proportion of treated: 2.86%
- Antibiotic exposure: 135 antibiotic days/1'000 livebirths

## Burden of CP-EOS

- Incidence: 0.49 per 1'000 livebirths
- Mortality: 3.2%

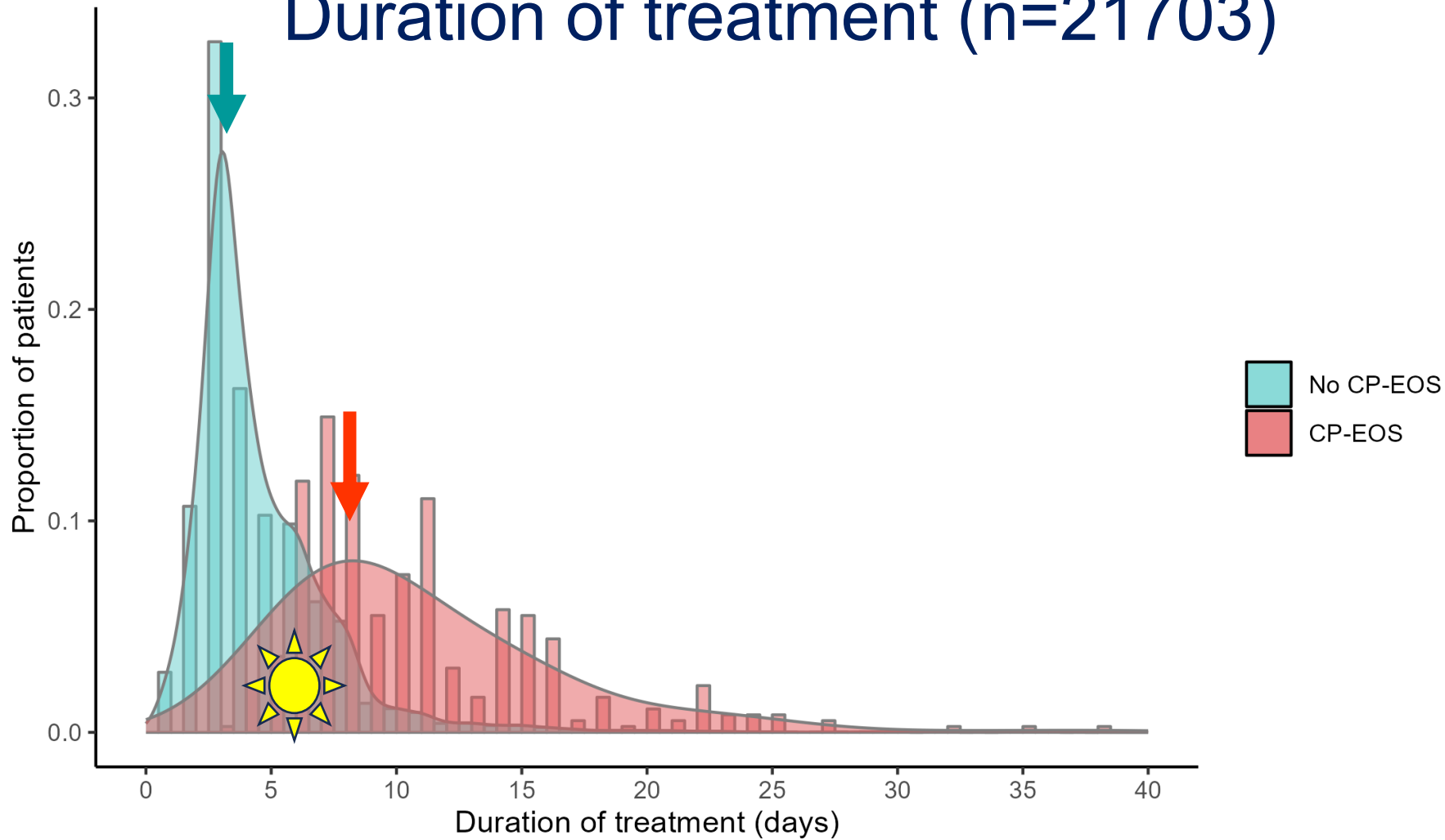
**1 out of 58 neonates started on antibiotics had a CP-EOS**

# Secondary analysis of AENEAS study

- 13 networks, 11 high-income countries
- Network : common strategy for preventing and managing suspected EOS
- Inclusion criteria :
  - Neonates  $\geq 34$  weeks
  - 5-year study period (2014-2018)
- No exclusion criteria



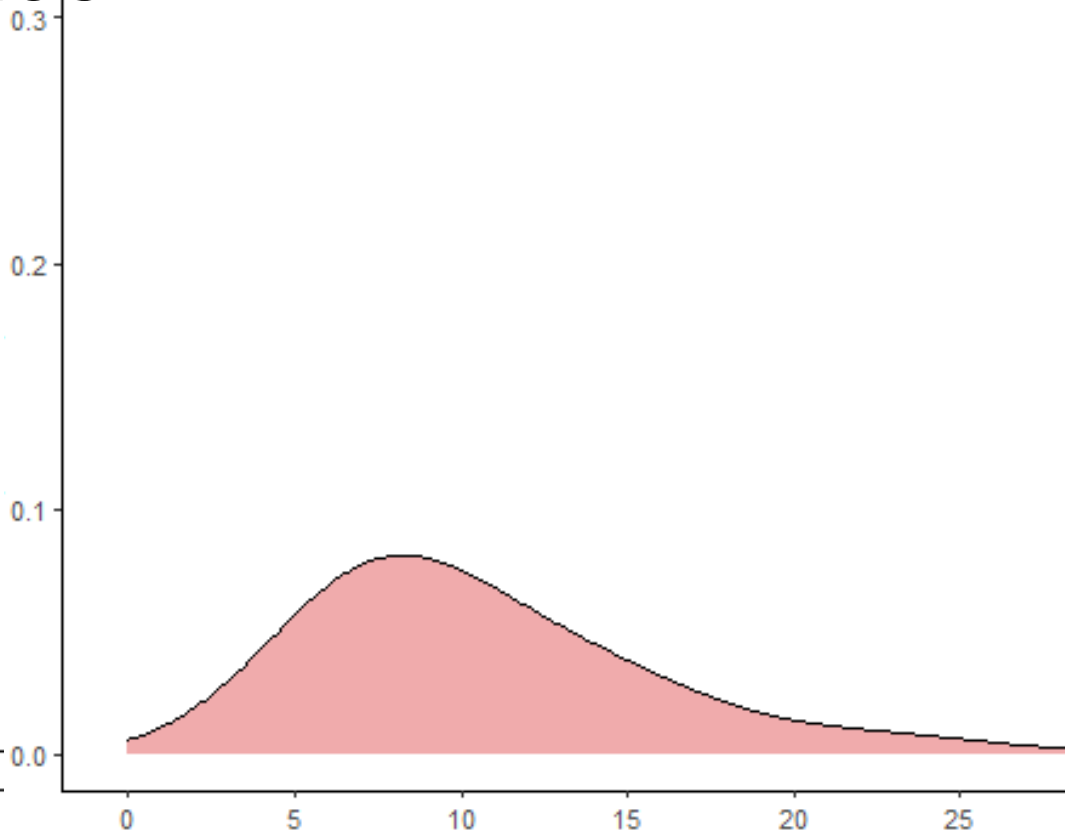
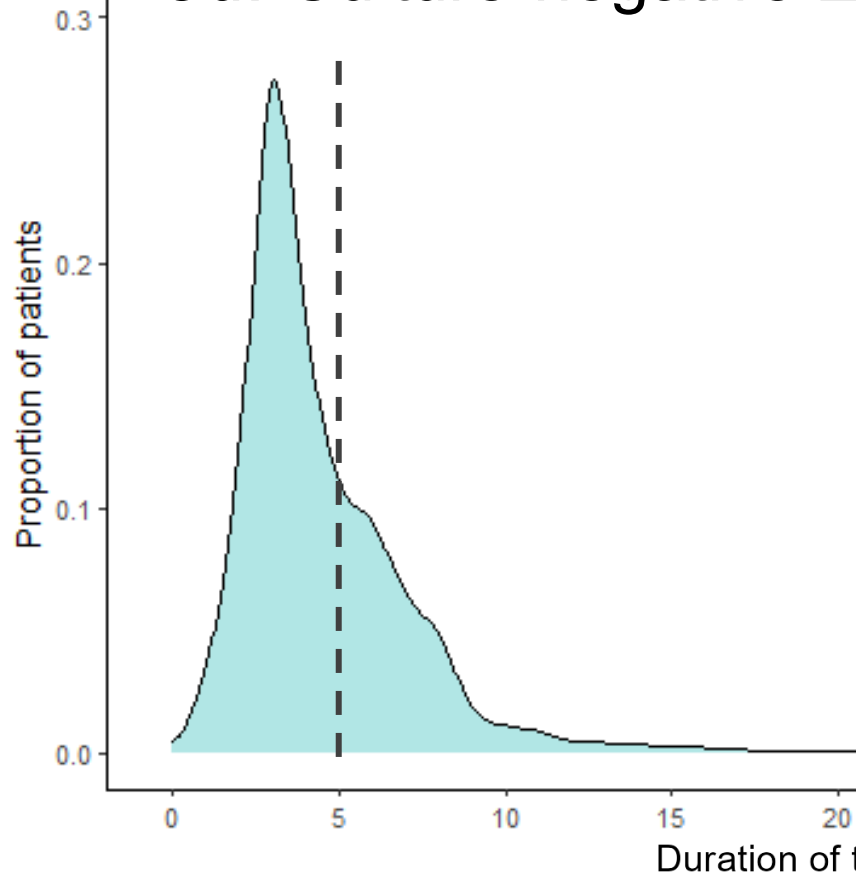
# Duration of treatment (n=21703)

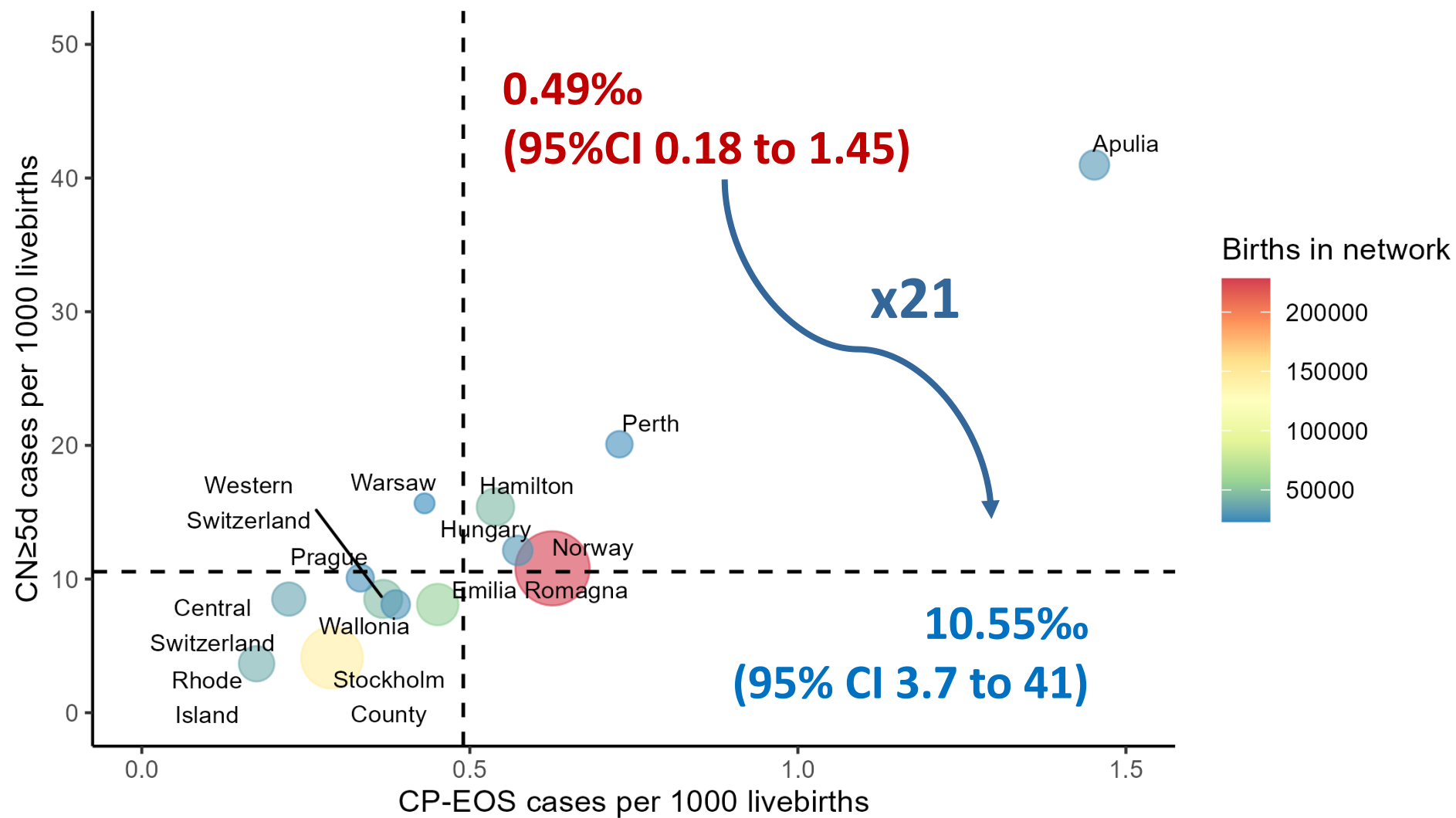


<5d: Ruled-out sepsis

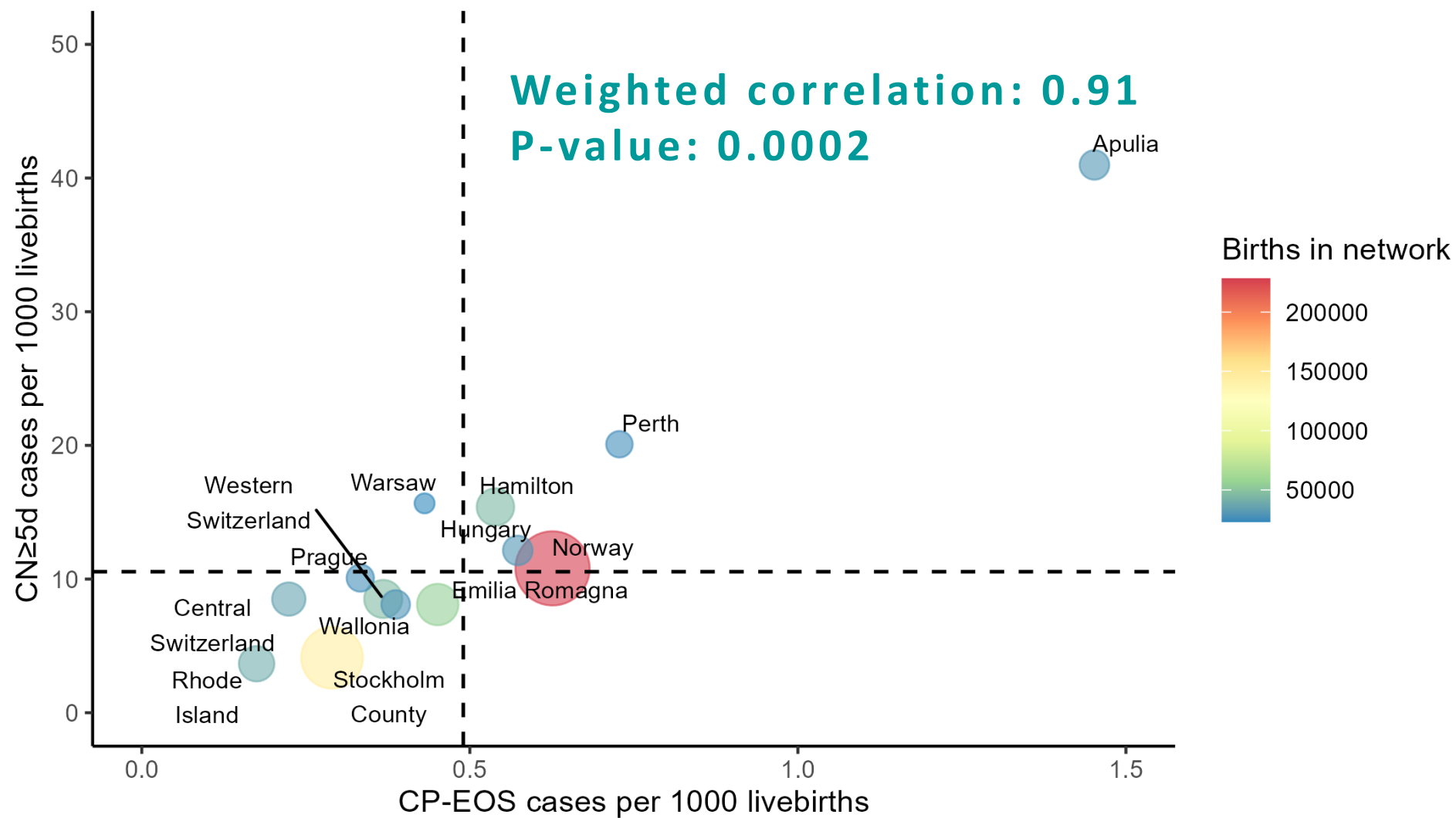
Culture-proven EOS

≥5d: Culture-negative EOS

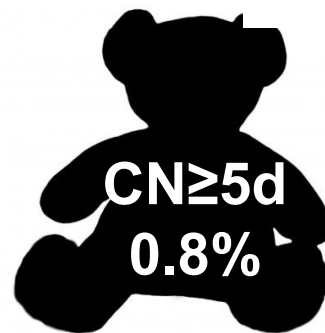
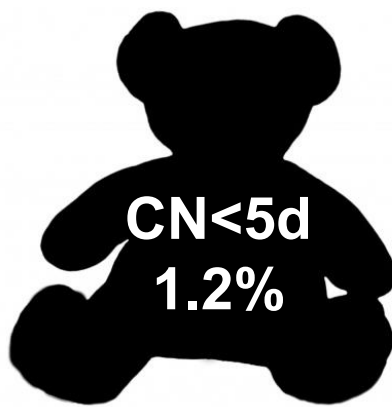
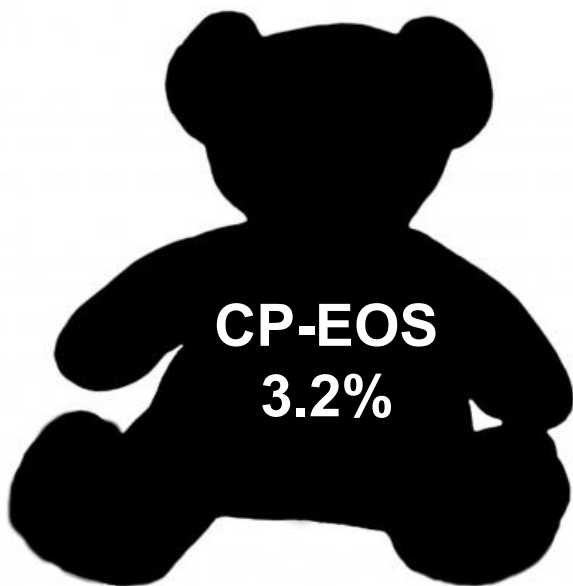




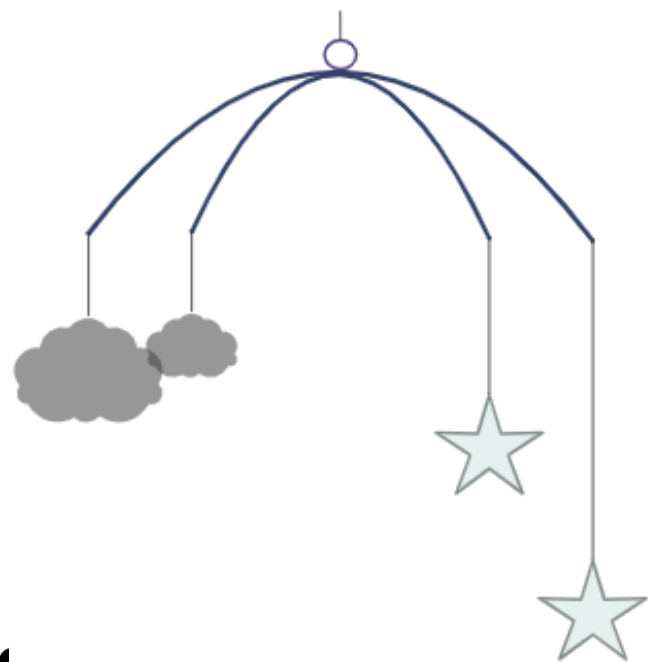




# Mortality (% of deaths in each group)

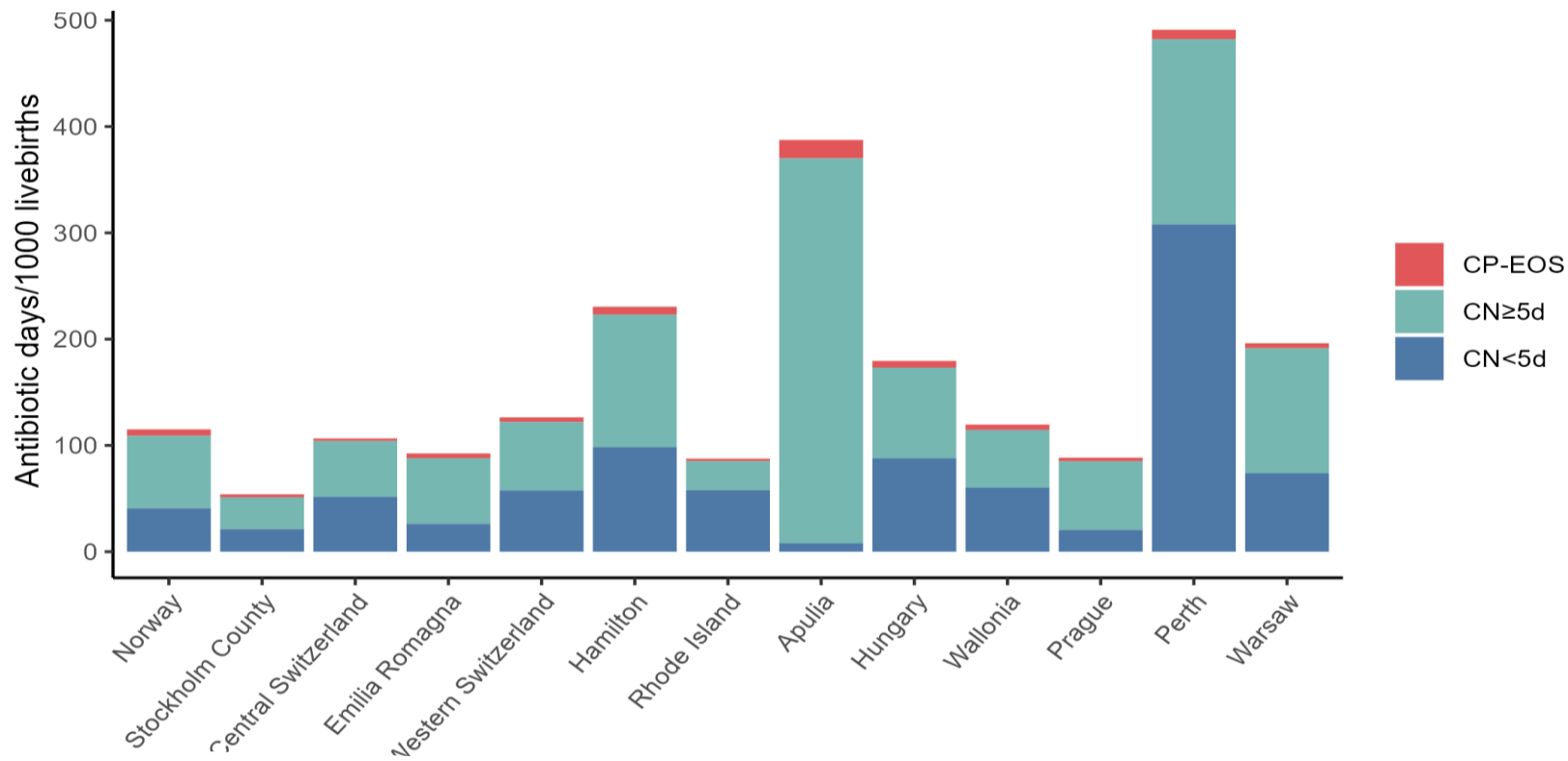


CP-EOS  
All deaths  
due to sepsis



CN≥5d  
No deaths  
related to  
sepsis

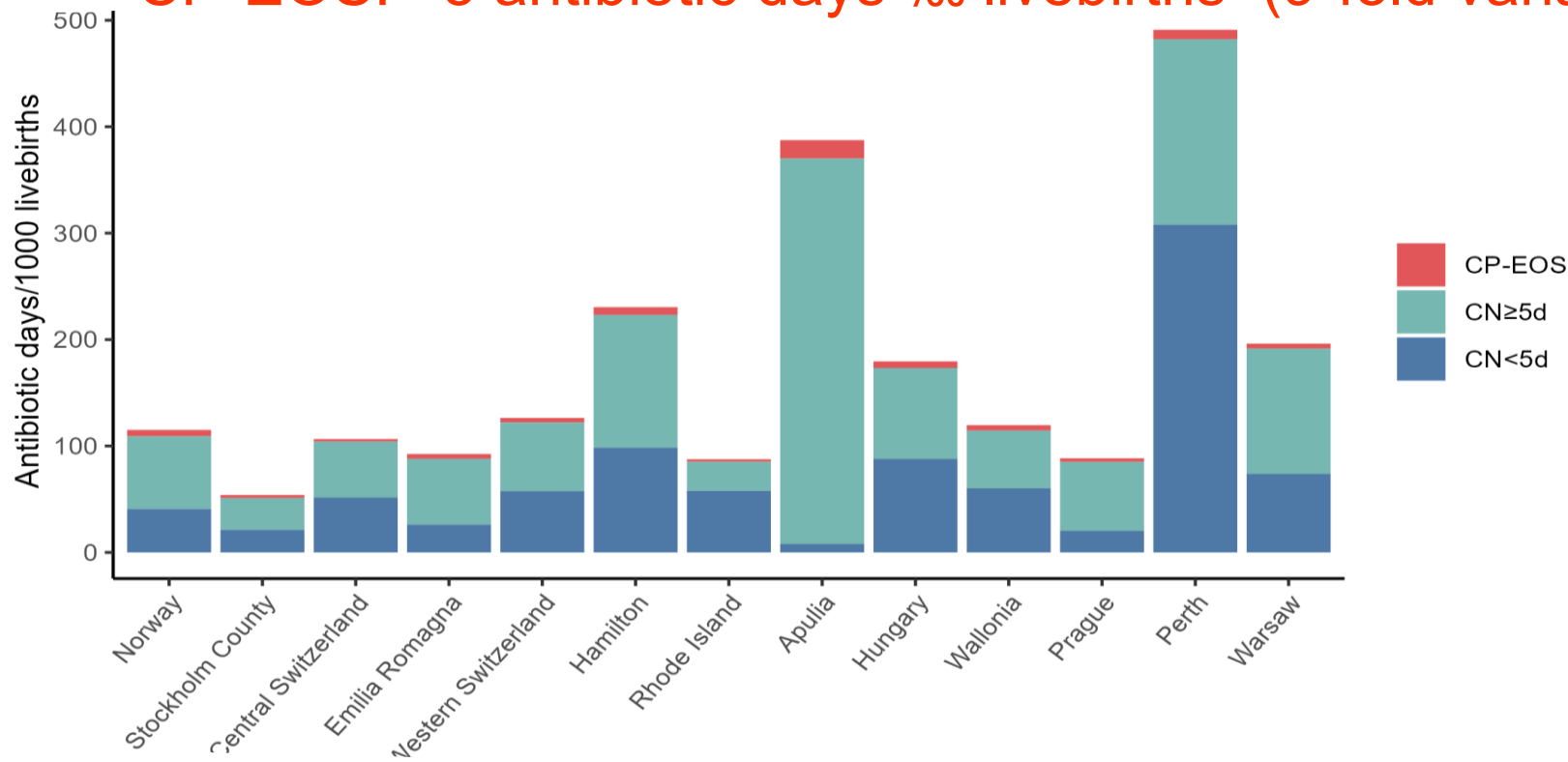
# Antibiotic exposure in each network



CN $\geq$ 5d: 77 antibiotic days ‰ livebirths (13-fold variation)

CN<5d: 53 antibiotic days ‰ livebirths (38-fold variation)

CP-EOS: 5 antibiotic days ‰ livebirths (9-fold variation)





# Conclusions for CN-EOS

- **Incidence 10.55/1'000 livebirths**
- **77 antibiotic days/1'000 livebirths**
- **Major contribution of CN-EOS to early-life antibiotic exposure**
- **Antimicrobial stewardship programs should target CN-EOS**



Thank you



<https://www.la4b.info>