

ABSTRACTS

Other

O01

Comparison of clinical guidelines for the treatment of acute uncomplicated cystitisMatej Lovrić^a, Petra Kovačević^a, Franciska Lovrić^a, Kamelija Horvatović^b^a School of Medicine, University of Mostar, Bosnia and Herzegovina^b Faculty of Science, University of Zagreb, CroatiaDOI: <https://doi.org/10.26800/LV-144-supl2-O01>

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Keywords: acute uncomplicated cystitis, antibiotics, guidelines, urinary infection

Acute uncomplicated cystitis (AUC) is one of the most common infections majority of women will experience. More than 60% are experiencing AUC at least once and 10% almost yearly. Urinary infection may be defined as AUC in non-pregnant women without developmental urinary tract anomalies or comorbidities. Corresponding to its incidence, around 15% of all out-of-clinic antibiotics prescribed for AUC in Europe and USA, raising the need for adequate and regular prescription evaluation. Following an extensive literature review, we compared Croatian National Guidelines of antimicrobial treatment and prophylaxis of urinary tract infections (ISKRA) 2009, National Institute for Health and Care Excellence England Guidelines (NICE) 2018, Korean Clinical Practice Guidelines for Antibiotic Treatment of Community-Acquired Urinary Tract Infections 2018, and European Association of Urology 2021 Guidelines on Urological Infections (EUA). All studied guidelines recommend Nitrofurantoin 100 mg per os twice a day as the drug of choice. However, treatment duration varies slightly. ISKRA recommends 7 days of Nitrofurantoin therapy, whereas other guidelines have set the duration to 3 and 5 days, respectively. EUA also advises the use of Fosfomycin trometamol and Pivmecillinam for AUC. Due to the high resistance of *E. coli* to trimethoprim/sulfamethoxazole in Korea, fluoroquinolones are preferred in empirical approach. With this study we aimed to analyze the discrepancies between different guidelines to evaluate the need for 13-year-old ISKRA guidelines to be reassessed and updated. Further studies on this matter, along with *E. coli* resistance estimation need to be conducted to assure optimal treatment options for this largely prevalent disease.

O02

Comparison of Drug Consumption in Croatia in Prepandemic 2019 and Pandemic 2020Anton Malbašić^a, Antonia Bukovac^a, Gabrijela Buljan^a, Sandro Gašpar^b^a School of Medicine, University of Zagreb, Croatia^b Department of Radiology, Children's Hospital Zagreb, CroatiaDOI: <https://doi.org/10.26800/LV-144-supl2-O02>

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Keywords: Economics, Health Expenditures, OTC Drugs, Prescription Drugs

INTRODUCTION/OBJECTIVES: Drug consumption (DC) has a continuous positive yearly trend in Croatia, and, as the life-style and health of the population has changed over the course of 2020 because of the COVID-19 pandemic, we wanted to compare DC before and during the pandemic.

MATERIALS AND METHODS: We analysed the data published by The Agency for medical products and medical devices of Republic of Croatia. We observed the overall DC and DC in different Anatomical Therapeutic Chemical System groups, in Croatian kuna (HRK) and in DDD/1000/day units.

RESULTS: Overall DC increased by 9,03% (from 7.649.563.162,00 HRK in 2019 to 8.408.855.389,00 HRK in 2020). The increase is also applicable to DC in DDD/1000/day (+3,08%: from 1.280,50 in 2019 to 1.321,16 in 2020). The greatest increase is seen in Antineoplastic and immunomodulating agents consumption (L group, +27,94% in HRK, but only increased by 4,12% in DDD/1000/day), as well as consumption of Cardiovascular drugs (C group, +16,12% in DDD/1000/day) and GI and metabolism drugs (A group, +15,60% in DDD/1000/day). Data has shown a decrease in Antiparasitics, insecticides and repellents consumption (P group, -12,15% in HRK). Notable are decreases in use of Respiratory system drugs (R group, -5,28% in DDD/1000/day), and Systemic-use anti-infectives (J group, -13,91% in DDD/1000/day).

CONCLUSION: Further research is needed to determine causality between the pandemic emergence and decrease in R and J group DC, as well as consumption of L group, which can somehow be explained by higher drug prices. The P group DC might be decreased by patients taking less outside activities during the year 2020.