

ERAS PROTOCOL -ANTIBIOTIC USAGE IN ONE DEPARTMENT

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Background : The Enhanced Recovery After Surgery (ERAS) protocol has demonstrated its effectiveness in reducing hospital stays, improving patient recovery, and lowering healthcare costs. Consequently, our department implemented the ERAS protocol in October 2022. The World Health Organization (WHO) has recognized the overuse of antibiotics and the increasing prevalence of antibiotic resistance as critical global concerns. Therefore, we aim to provide an overview of our department's antibiotic usage, average length of hospital stay, and complication rates. In 2024, our department underwent structural renovations. This data analysis compares outcomes from 2022 and 2023. We examined cases from these two years in terms of antibiotic usage, average length of hospital stay, and complication rates.

Methods : In 2022, we conducted 903 hepatobiliary and pancreatic operations, while in 2023, we performed 869. The length of hospital stays remained unchanged between these two years. The total complication rate was 15% in 2022, and although it did not increase in 2023, the complication rate was 10.4%. This data indicates a common use of cephalosporin antibiotics, which have been reduced by 43%. Additionally, imipenem/cilastatin usage dropped by 64%, ciprofloxacin decreased by 50%, and meropenem was reduced by 45%.

Results : Our department has experienced numerous benefits from implementing this ERAS protocol. Although the use of antibiotics has decreased, the length of hospital stays and the complication rate have not changed.

Conclusions : If we consistently adhere to the ERAS protocol, we can reduce antibiotic use and minimize unnecessary usage, thereby lowering antibiotic resistance and benefiting our hospital costs.

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