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## Background

In 2019, the project about developing a system for measure antibiotic usage in each hospital was launched. As the basic project, we developed 'antibiotic classification for measuring Korean hospitals' using a modified Delphi method.

### Methods

### Study design

Two series of modified Delphi studies were performed from

- First series: classify antibiotics used in Korean hospitals
- Second series: analyze antibiotic components according classes

 Each Delphi study included two rounds of surveys in order to opinions and refine the information related to each study.

 The questions in the first round were adopted from the a classification of the NHSN and antibiotics not available in excluded.

#### • Delphi panels

 Infectious diseases physicians (10), professor of preventive the researcher of Health Insurance Review & Assessment Se

#### Evaluation of the appropriateness of each question

- Four-point Likert scale (1 = very inappropriate, 2 = inappropriate)appropriate, 4 = very appropriate)
- Item acceptance: Content validity ratios (CVRs) ≥0.56

# Development of antibiotic classification for measuring antibiotic usage in Korean hospitals using a modified Delphi method

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## Results

e and benchmark ic work for the Ig antibiotic usage in	<ul> <li>The response rates</li> </ul>
	<ul> <li>First series: 7/12 (58.3%) and 9/12 (75.0%)</li> </ul>
	<ul> <li>Second series: 7/12 (58/3%) and 8/12 (66.7%)</li> </ul>

Table 1. Antibiotic classification in Korean hospitals accord

	Broad-spectrum antibacterial agents predominantly used for hospital-onset infections in adults*
Jul to Aug 2019.	Broad-spectrum antibacterial agents predominantly used for
S	community-acquired infections in adults*
ng to antibiotic	Antibacterial agents predominantly used for resistant gram-period infections in adults*
	Narrow-spectrum beta-lactam agents in adults*
o gather	Antibacterial agents posing the highest risk for Clostridioides of infection in adults
antibiotic	Antibacterial agents predominantly used for extensive antibio resistant gram-negative bacteria in adults*
n Korea were	Broad-spectrum antibacterial agents predominantly used for hospital-onset infections in children
	Broad-spectrum antibacterial agents predominantly used for community-acquired infections in children
	Antibacterial agents predominantly used for resistant gram-pe infections in children
'e medicine (1),	Narrow-spectrum beta-lactam agents for children
ervice (1).	Macrolides for children
	Antibacterial agents posing the highest risk for Clostridioides of infection in children
	Antifungal agents predominantly used for invasive candidiasis Children
ppropriate, 3 =	Antibacterial agents predominantly used for extensive antibio resistant bacteria in children
	Agents predominantly used for surgical site infection prophylo Total antibacterial agent*

**Conclusions:** This study provides antibiotic classification for measuring antibiotic usage in Korean hospitals. This classification may guide to develop a system for measuring of antibiotic usage in each Korean hospital.

Table 2. Consensual definition of antibiotic components according to the antibiotic classification in Korean hospitals

				CVR	Mean ± SD		
	Broad-spectrum antibacterial agents predominantly used for hospital-onset infections in adults						
			Amikacin (IV)	0.750	$3.25 \pm 0.71$		
			Tobramycin (IV)	0.750	$3.00 \pm 0.53$		
			Cefepime	1.000	$4.00 \pm 0.00$		
			Ceftazidime	1.000	$4.00 \pm 0.00$		
			Imipenem	1.000	$4.00 \pm 0.00$		
			Meropenem	1.000	$4.00 \pm 0.00$		
			Doripenem	1.000	$4.00 \pm 0.00$		
			Piperacillin/tazobactam	1.000	$4.00 \pm 0.00$		
ding to o	Dalahim	athad	Other 4 <sup>th</sup> generation cephalosporins	1.000	$3.75 \pm 0.46$		
ang to a Delphi method		lethod	Broad-spectrum antibacterial agents predominantly used for community-acquired inf	ections i	n adults		
	CVR	Mean + SD	Cefdinir	1.000	3.75 ± 0.46		
	1 000	$2.79 \pm 0.44$	Cefixime	0.750	3.75 ± 0.46		
	1.000	$3.70 \pm 0.44$	Cefotaxime	1.000	$4.00 \pm 0.00$		
			Cefpodoxime	1.000	3.75 ± 0.46		
	1.000	$3.78 \pm 0.44$	Ceftriaxone	1.000.	$4.00 \pm 0.00$		
			Ertapenem	1.000	$3.88 \pm 0.35$		
ocitivo	1 000	$2.00 \pm 0.33$	Gemifloxacin	1.000	$3.75 \pm 0.46$		
OSIIIVE	1.000	$3.07 \pm 0.33$	Levofloxacin	1.000	3.88 ± 0.35		
			Moxifloxacin	1.000	3.88 ± 0.35		
	1.000	3.89 ± 0.33	Ciprofloxacin	1.000	3.88 ± 0.35		
difficile	-1.000	$1.78 \pm 0.44$	Other fluoroquinolones	0.750	$3.63 \pm 0.74$		
			Other 3 <sup>rd</sup> generation cephalosporins	0.750	$3.13 \pm 0.64$		
	1 000		Antibacterial agents predominantly used for resistant gram-positive infections in adult	S			
DTIC	1.000	$3.89 \pm 0.33$	Linezolid	1.000	$4.00 \pm 0.00$		
			Vancomycin (IV)	1.000	$4.00 \pm 0.00$		
	-0.111	$2.67 \pm 0.87$	Teicoplanin	1.000	$4.00 \pm 0.00$		
			Narrow-spectrum beta-lactam agents in adults	1 000			
	0 1 1 1	$0/7 \pm 0.07$	Amoxicillin Amoxicillin (olevulaneto	1.000	$4.00 \pm 0.00$		
	-0.111	2.0/ ± 0.0/	Amoxicillin	1.000	$3.00 \pm 0.33$		
			Ampicillin/sulbactam	1.000	$3.00 \pm 0.00$		
ositive	-0.556	$2.22 \pm 0.44$	Nafcillin	1.000	$3.88 \pm 0.35$		
			Cefadroxil	1.000	$3.00 \pm 0.00$		
	_0 111	2 67 + 0 87	Cefazolin	1.000	$3.88 \pm 0.35$		
	-0.111	$2.07 \pm 0.07$	Cephalexin	1.000	$3.75 \pm 0.46$		
	-0.556	$2.00 \pm 1.00$	Cefotetan	1.000	$3.62 \pm 0.52$		
difficile	-0.778	$1.78 \pm 0.67$	Cefoxitin	1.000	$3.62 \pm 0.52$		
			Cefaclor	0.750	$3.63 \pm 0.74$		
s in	-0.111	$2.56 \pm 0.73$	Cefprozil	0.750	$3.63 \pm 0.74$		
•	0.111	2.00 2 0.7 0	Other 1 <sup>st</sup> generation cephalosporins	0.750	3.50 ± 0.76		
	$\bigcirc$ 111	$0/7 \pm 0.07$	Other 2 <sup>nd</sup> generation cephalosporins	0.500	$3.38 \pm 0.92$		
JIC	-0.111	2.0/ ± 0.0/	Antibacterial agents predominantly used for extensive antibiotic resistant gram-negation	ive bact	eria in adults		
			Colistin (IV)	1.000	$4.00 \pm 0.00$		
axis	0.333	3.11 ± 0.93	Tigecycline	1.000	$3.88 \pm 0.35$		
	1.000	$4.00 \pm 0.00$	Ceftolozane/tazobactam	1.000	$3.75 \pm 0.46$		