

MILDE ANTIBIOTIKA



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ÖSTERREICHISCHE GESELLSCHAFT FÜR INFektionsKRANKHEITEN UND TROPENMEDIZIN



FAKTEN

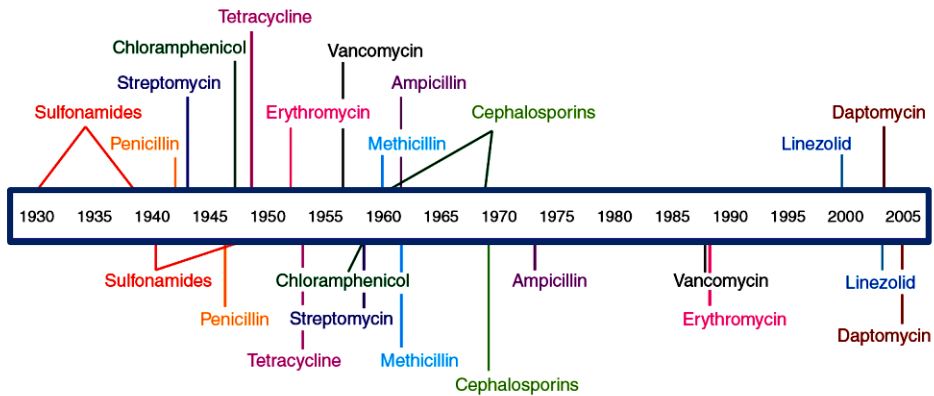
INFEKTIONEN

- zählen zu den häufigsten Todesursachen
- sind primär heilbare Erkrankungen



MARKTEINTRITT & RESISTENZEN

Antibiotic deployment

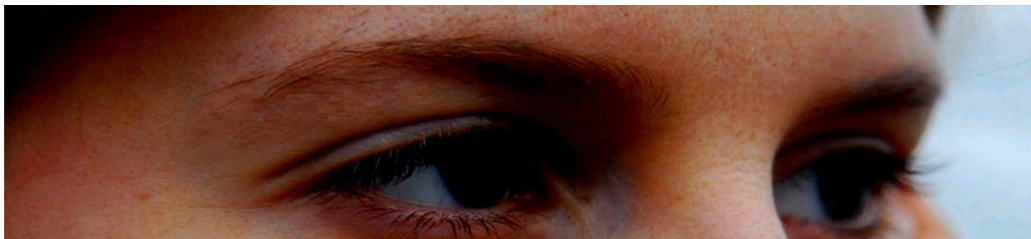


Antibiotic resistance observed

Clathworthy, Nat Chem Biol 2007



MILDE ANTIBIOTIKA vs VIREN?



**ANTIBIOTIKA HELFEN NICHT BEI GRIPPE,
ERKÄLTUNG ODER AKUTER BRONCHITIS. SPRECHEN
SIE MIT IHREM ARZT ODER APOTHEKER DARÜBER**

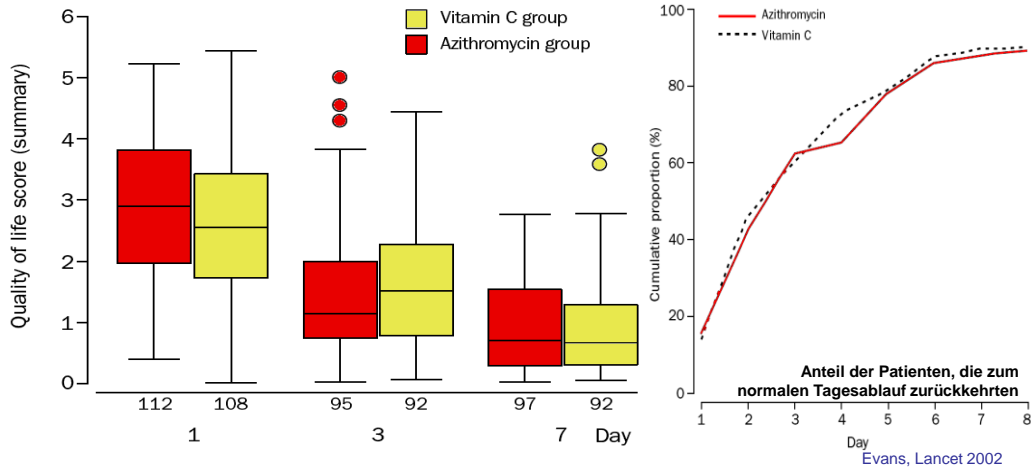


www.antibiotics-info.be/index.php?lang=de

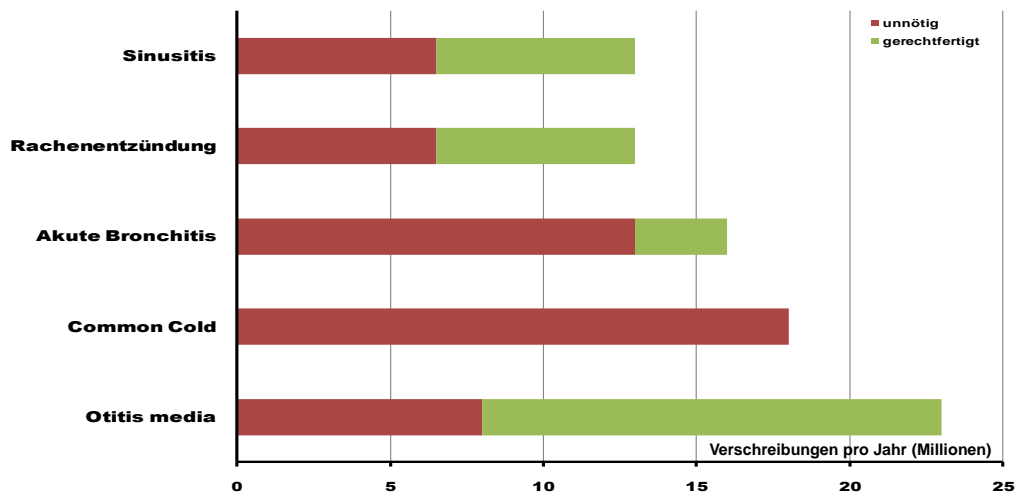


ANTIBIOTIKA SIND VITAMINE

AKUTE BRONCHITIS



ANTIBIOTIKAVERBRAUCH & RTI's





ÖSTERR ERKENNTNISSE

- Welches der folgenden Atemwegsantibiotika würden Sie als "mild" einstufen?

1. Tetracycline
2. Betalaktamantibiotika
3. Makrolide
4. Fluorchinolone
5. andere Antibiotika
6. kein Antibiotikum



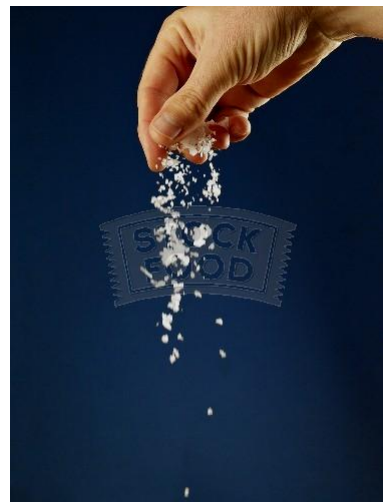
Thalhammer, Data on file 2011



THERAPIEPRINZIPIEN

- **Dosierung** ausreichend hoch wählen
- **Unterdosierung** fördert Resistenzentwicklung

**ES GIBT KEIN
"BISSCHEN"
ANTIBIOTIKUM**





ANTIBIOTIKA ALS ORPHAN DRUGS

IDSA
Infectious Diseases Society of America

July 18, 2008

Andrew C. von Eschenbach, MD
Commissioner
United States Food and Drug Administration
5600 Fishers Lane, Room 14-71
Rockville, MD 20857

Dear Commissioner von Eschenbach:

I write on behalf of the Infectious Diseases Society of America (IDSA) to request that the Food and Drug Administration (FDA) clarify its policies in applying the Orphan Drug (OD) Act to serious and life-threatening infectious diseases associated with antimicrobial-resistant organisms, and specifically to those infections that are resistant to antimicrobial therapies. Related to this issue, we are eager to hear the Agency's opinion as to whether the OD program provides the proper mechanisms to adequately stimulate pharmaceutical sponsors' antimicrobial drug research and development (R&D) efforts or whether a parallel regulatory framework could do a better job in advancing antimicrobial drug R&D as well as R&D into related, new diagnostics and vaccines. Without quick action to strengthen the diminishing antimicrobial drug pipeline, and to support the development of other products needed to quickly detect and prevent resistant infections, the United States will not be able to fight the increasing number of resistant infections plaguing patients across the country.

IDSA represents more than 8,000 infectious diseases physicians and scientists devoted to patient care, education, research, prevention, and public health. Our members care for patients of all ages with serious and life-threatening infections, including meningitis, pneumonia, tuberculosis, antimicrobial drug-resistant infections, and those with cancer or transplant who have life-threatening infections caused by unusual microorganisms, HIV/AIDS, and other emerging infections.

Antimicrobial-Resistant Infections: Why IDSA Is Concerned
Antimicrobial resistance is a serious patient safety and burgeoning public health problem. Bacterial organisms cause the resistant infections about which infectious disease specialists and other physicians are most concerned at this time. Bacterial infections affect hundreds of thousands of Americans and cause tens of thousands of deaths each year. Resistant infections are painful, difficult to treat, and cost many billions of dollars to the U.S. health care system annually. These "bad bugs" have become a silent epidemic in communities and hospitals across the United States, as well as around the world. And yet, an astoundingly diminutive amount of federal resources is being committed to address this staggering problem. In fiscal year (FY) 2006, FDA spent only \$24 million on its collective antimicrobial resistance activities.

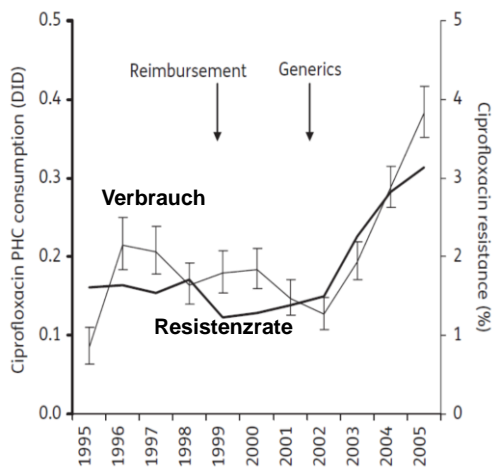
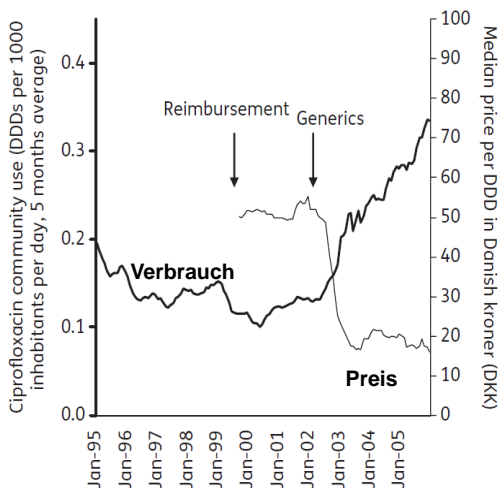
IDSA Headquarters
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Washington, D.C. 20005
Phone: (202) 391-7000
Fax: (202) 391-7001
www.idsociety.org

... to request that the Food and Drug Administration (FDA) clarify its policies in **applying the Orphan Drug (OD) Act to serious and life-threatening infectious diseases associated with antimicrobial-resistant organisms**, and specifically to those infections that are resistant to antibacterial therapies ...

Poretz, IDSA 2008



KLEINE KOSTEN – HOHE RESISTENZ



Jensen, J Antimicrob Chemother 2010



FAZIT

■ **Es gibt keine "milden" Antibiotika**

- falsch in der Indikation ➔ Resistenz
- falsch in der Dosierung ➔ Selektion
- falsch in der Therapiedauer ➔ Rezidiv & Resistenz

■ **Es darf nur korrekt eingesetzte Antibiotika geben**

- korrekt in der Indikation
- korrekt in der Dosierung
- korrekt in der Therapiedauer



Kubin
Der Tod
kommt in
die Welt

Klinische InfektiologInnen in Spitälern ab 500 Betten.

