Abstract
Antibiotic prescription habits, cost pattern, and the prospective intervention in an Intensive Care Unit were analyzed. Methods: Data on antibiotic utilization and costs were collected prospectively from individual electronic charts from August 2003 to January 2004, and retrospectively from August to December 2002. Results: A total of 180 and 107 patients were surveyed in 2002 and 2003. In 2002, Piperacillin-Tazobactam (13.8%) and Imipenem/Cilastin (11.2%) were the most prescribed medications; while, in 2003, Vancomycin (12.6%) and Imipenem/Cilastin (11.3%) were prescribed, respectively. Total defined daily dose (DDD) and Drug Utilization 90% (DU90%) index for 2002 and 2003 were 2031.15 and 2325.90 DDDs (p>0.1) and 1777.57 and 2079.61 DU90%, respectively (p>0.1). The Median Total Cost /100 admission days (CI 95%) were NIS13,310 (11,110;18,420) and NIS13,860 (6,710;18,020) (p=0.66), respectively. Conclusions: Intervenational programs should focus on promoting infectious control with rational antibiotic prescription aimed at minimizing the future emergence of bacterial resistance and futile expenses.

Keywords
Anti-Bacterial Agents. Drug Utilization.
Hospitals. Israel.