

Cephalosporin

Liu et al. reviewed the literature for data from randomized controlled trials (RCTs) on third-generation cephalosporins compared to other antibiotic regimen in neurosurgery. End point of the RCTs was the occurrence of [surgical site infections](#) (SSIs)-data were pooled in a fixed-effects metaanalysis. Five randomized controlled trials enrolling a total of 2209 patients were identified. The pooled [odds ratio](#) for SSIs (overall) with third-generation cephalosporins prophylaxis in the five RCTs was 0.94 (95% CI, 0.59-1.52; P=0.81). No significant difference between third-generation cephalosporins and alternative regimen was identified. When analyzing organ SSIs (osteomyelitis, meningitis, and others intracranial infections) in data derived from four RCTs (1596 patients), third-generation cephalosporins failed to show superiority (pooled odds ratio 0.88; 95% CI 0.45-1.74; P=0.72).

Third-generation cephalosporin antibiotic prophylaxis fails to show superiority over conventional regimens regarding both incisional and organ related SSIs in neurosurgery ¹⁾.

¹⁾

Liu W, Neidert MC, Groen RJ, Woernle CM, Grundmann H. Third-generation cephalosporins as antibiotic prophylaxis in neurosurgery: what's the evidence? Clin Neurol Neurosurg. 2014 Jan;116:13-9. doi: 10.1016/j.clineuro.2013.10.015. Epub 2013 Nov 1. Review. PubMed PMID: 24269048.

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