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Clinical lead for Sheffield OPAT Service

BSAC regional workshop
Birmingham 21st June 2022

Mr KP – where next?



62yo warehouse manager

PMH

- Diabetes mellitus
- Crohn's disease terminal ileum
 - Quiet since 20s
 - Adalimumab 2017-2020
 - Stopped due to bladder ca
- Fatty liver disease
- Osteoarthritis
- Bile acid malabsorption

DH

- Atorvastatin
- Budesonide
- Fluoxetine
- Omeprazole
- Painkillers
- Laxatives
- **ALLERGIES:**
 - rash to penicillin
 - vomiting on doxy

Non-invasive bladder ca resected @DGH

- 30th March 2021
 - Cystoprostatectomy in Sheffield
 - Full thickness breach to wall of rectum during dissection
 - Rectal repair
 - Bilateral cutaneous urostomies
- Post op presacral collection on CT
 - 7 days cefuroxime & metronidazole IV
 - 14 d cefixime and mz PO



Post op hokey cokey

- Sepsis secondary to the collection - worse after water soluble enema
- Leak identified and repaired again 23/4/21
 - Defunctioning colostomy
- Meropenem, teicoplanin, gentamicin 5/5/21
- Home on po fluconazole 10/5/21

- Readmitted 6 to 17/6/21 after collapse at home, occult fracture to right elbow.
- Stent problems
 - nephrostomy

Micro

- Previous MRSA colonised
- Klebsiella urine Sept '21
- VRE left urostomy Oct '21
- VRE stool screen Nov '21

More hokey cokey

Admitted urosepsis x2 July 2021

- Bilateral ureteric stents 21/7/21
- IV meropenem then trim and fluconazole

- Nephrostomies removed
- Antibiotics 'because of extensive infection history'
- Trimethoprim prophylaxis

Clinic August '21 & OPAT

- Coliform in urine sensitive to co-amox and phofomycin
- GP prophylactic nitrofurantoin

- Admitted 10/10 to 25/10/21 'failed discharge'
- Cefuroxime, mz, meropenem
- VRE left urostomy
- **OPAT** - ciprofloxacin, daptomycin, fluconazole for 6w 'to sterilise the collection'

2022 Happy New Year

- Admission 21/12/21 to 6/1/22
 - Ongoing rectal leak into the presacral collection
 - Proximal and distal lavage
 - Transverse to loop colostomy op
 - OPAT - 6 w ertapenem
 - Runny stools ? Active crohns
- Needs
 - Viable bowel - gastro
 - No rectal leak / fistula – gen surgery
 - No active infection – OPAT

Clinics Feb '22

- Urology - Looks well (OPAT!)
 - Pelvic collection increasing in size
 - Prolong OPAT please – ertapenem
- Gastro – 3 months later
 - 'No active Crohn's'
 - 'Not contributing to the rectal leak'
- **Plan** is joint operation to reverse colostomy and form a colonic conduit

ID ward & OPAT – April to June '22

- CRP blip (again)
- Norfolk holiday – very reluctant **OPAT self admin**
- Well in self resolved spontaneously
- Patient reports flushing urostomies himself
- CRP 108 – called patient – away on city break
- More scans planned
- Sampling 'difficult'
- Low mood, unhappy with care
- CT guided aspiration planned.....

Miss KM- 1st week in OPAT

Story

- 22 yo nurse
- NSCLC diagnosed aged 16 - completed
- metastatic disease in pleura - 3rd line monoclonal therapy
- IPC since April 2021 now colonised with Pseudomonas blamed for infective episodes
- Self admin high dose Tazocin

Options?

- AMR?
- Technical problems with drains
- Recurrent admissions
- Prognosis??

Mr JT – OPAT since Jan '22

Story

- 37 yo male
- Left periprosthetic hip fracture sep '21;
- Recurrent infections with multiple organisms
- No bone left
- Netherton's syndrome = poor skin healing

Options?

- Cure infection medically
- Hind quarter amputation
 - May not heal due to poor skin quality
 - Severe disability

OPAT trends in Sheffield



Pre-COVID

- Complexity +
- Less cellulitis

COVID

- Shielding pts
- Less NOE
- Less post-op
- Staffing

Post-COVID

- Complexity ++
- Cancer
- Inoperable
- NOE
- MDTs

Challenges

- Vulnerable cancer patients
- Multiple parent teams
- Extensive pre-OPAT ABx
- Delayed imaging
- Delayed surgical decisions
- Unclear journey for all
- Transition towards palliation in OPAT?





Thank you

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