Nebraska ASAP Newsletter

ISSUE 10 VOLUME 2
OCTOBER 2025

THE ANTIMICROBIAL ADVOCATE

IN THIS ISSUE

UPCOMING EDUCATION

NEBRASKA INFECTIOUS DISEASES SOCIETY "ASK THE EXPERT" WEBINAR SERIES

When a Toothache Turns Dangerous: Unmasking Pediatric Odontogenic Infections

Tuesday, October 28th, 2025, 12 – 1PM

Registration Link

The DOTS Trial

Full Article Link

DALBAVANCIN FOR TREATMENT OF *STAPHYLOCOCCUS AUREUS* BACTEREMIA

- **Background:** Previous randomized trials assessing dalbavancin for other indications included patients who were subsequently found to have *S. aureus* bacteremia and reported clinical success, but more data is needed
- **Objective:** Evaluate the efficacy and safety of dalbavancin vs. standard therapy for completing treatment of **complicated** *S. aureus* bacteremia in hospitalized patients
- **Design:** Randomized clinical trial conducted across multiple centers.
- **Participants:** Hospitalized adults diagnosed with complicated *Staphylococcus aureus* bacteremia that had received at least 72 hours of therapy and have achieved blood culture clearance on initial therapy
- **Intervention:** Dalbavancin administered on day 1 and day 8
- **Comparison:** Standard therapy (cefazolin for MSSA and vancomycin or daptomycin for MRSA)
- **Primary Outcome:** Clinical success at 30 days post-treatment
- **Results: Dalbavancin demonstrated non-inferior efficacy to standard therapy, with a comparable safety profile.**

Dalbavancin's long half-life and dosing regimen can help hospitals complete therapy for stable *S. aureus* bacteremia, though its safety in patients with severe or complex infections is less certain. Dalbavancin recipients had a shorter median length of hospital stay, but results do not necessarily inform whether this allowed patients to be discharged directly home.

PALTmed STATEMENT

COVID VACCINATION IN POST-ACUTE AND LONG-TERM CARE

The best protection against severe outcomes of COVID-19 is to receive the 2025-2026 COVID-19 vaccine.

All residents ≥ 18 years: Should receive one dose of the 2025-2026 COVID-19 vaccine.

- **Moderna's "SPIKEVAX", Novavax's "NUVAXOVID", and Pfizer-BioNTech's "COMIRNATY", can be administered at least 2 months after any prior COVID-19 vaccine dose.**
- **Moderna's "MNEXSPIKE" can be administered at least 3 months after any prior COVID-19 vaccine dose.**

Residents with moderate to severe immunocompromise: Should receive at least two doses of the 2025–2026 COVID-19 vaccine. The preferred interval between doses is 6 months, but they may be given as soon as 2 months apart if needed (e.g., during an outbreak). Additional doses may be given ≥2 months after the last dose based on shared clinical decision-making.

All staff: Clinical staff and nonclinical staff including vendors, contractors, and trainees in PALTC facilities should receive one dose of the 2025-2026 COVID-19 vaccine. Staff with moderate to severe immunocompromise may need additional doses.

Implementation Considerations

- Providing on site vaccination for residents and staff is preferred.
- Facilities may partner with a community pharmacy, county or state health departments, as available, or other third-party vaccinators to ensure vaccine access for staff.
- Resources to support increasing immunization rates in PALTC facilities are available **HERE**

Full Article Link

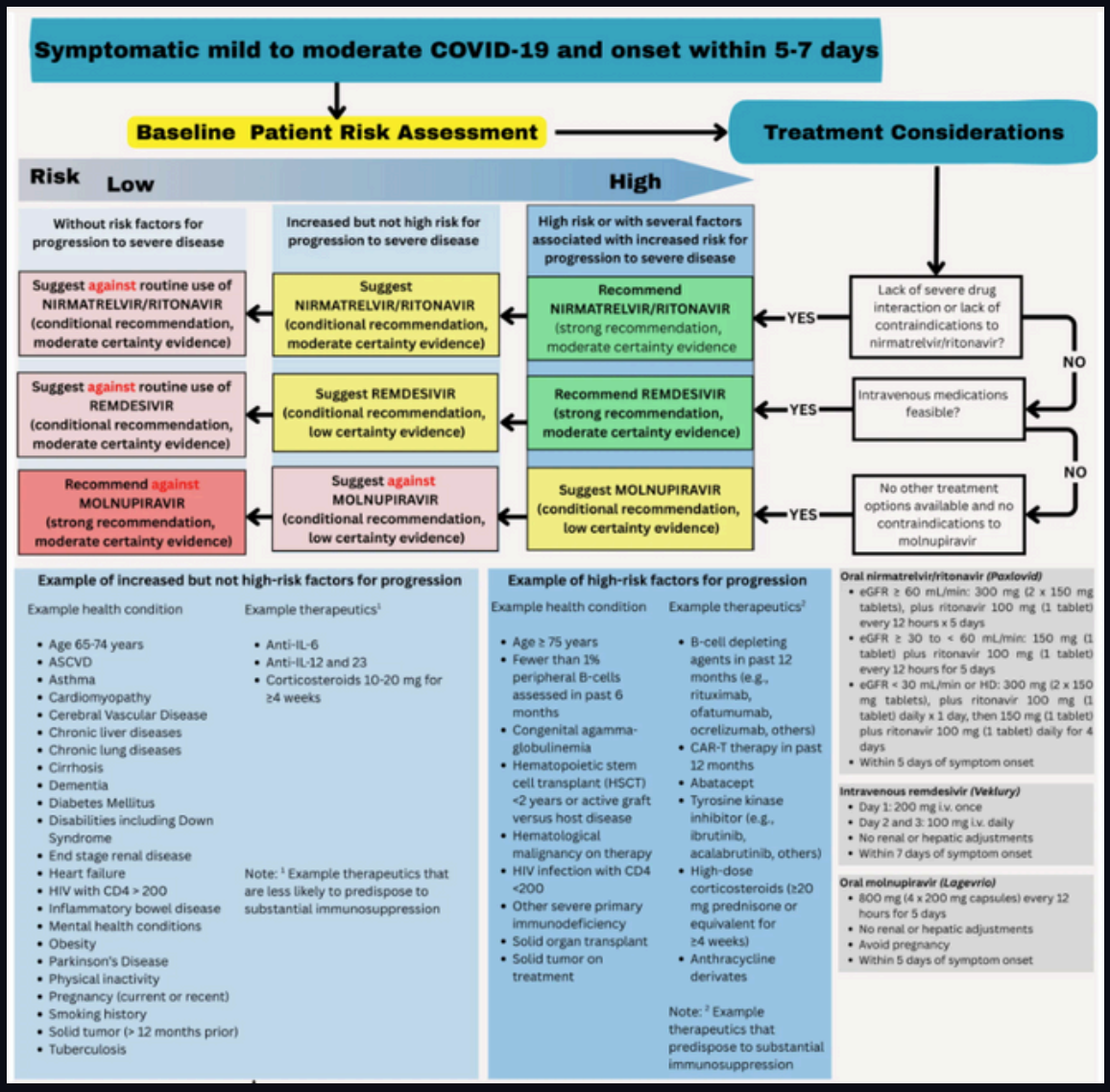
INFECTIOUS DISEASES SOCIETY OF AMERICA

GUIDELINE UPDATES FOR MANAGEMENT OF COVID-19

Now is a great time to review hospital and clinic COVID-19 treatment protocols!

An updated evidence-based guideline has been released on the use of antivirals for adults with mild to moderate COVID-19, as well as an algorithm to guide the selection of antivirals within the new **How to Approach a Patient with Mild to Moderate COVID-19** section.

IDSA Guideline Link



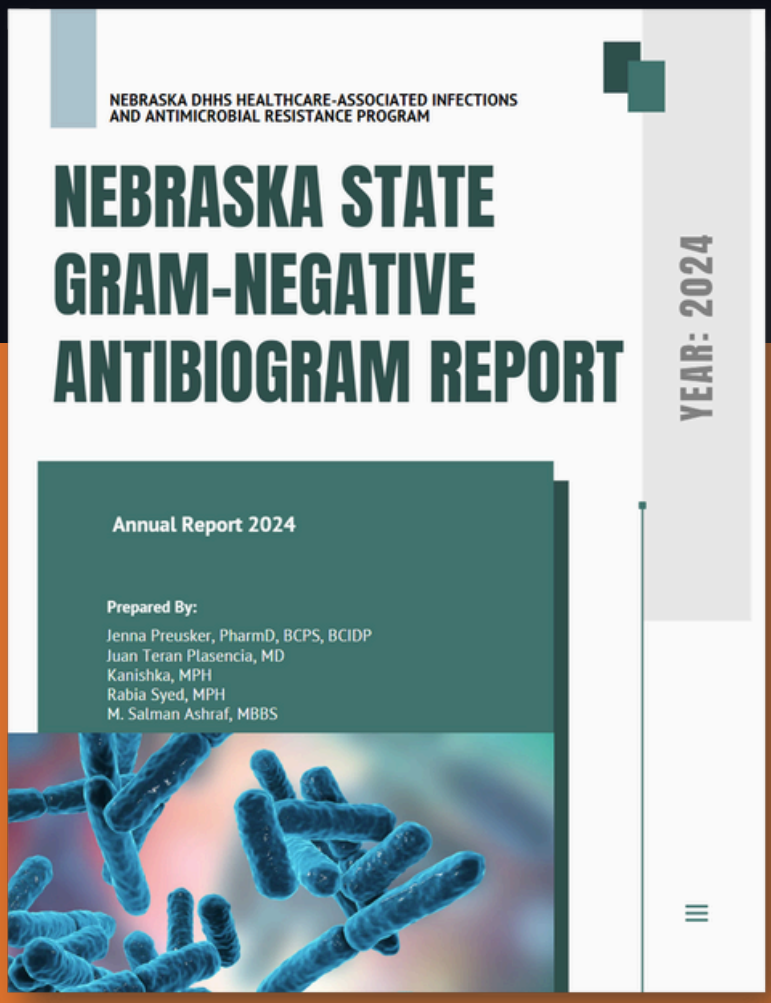
In addition, a new evidence-based guideline has been released on the use of baricitinib vs. tocilizumab in hospitalized adults with rapidly progressing severe or critical COVID-19 who require an additional immunomodulator.

The panel has previously issued recommendations on baricitinib vs. no baricitinib and tocilizumab vs. no tocilizumab, but this new recommendation compares baricitinib to tocilizumab when the decision has been made to give one or the other.

NEW! 2024 NEBRASKA GRAM-NEGATIVE ANTIBIOGRAM REPORT

A newly published report is available from the Nebraska DHHS Healthcare-Associated Infections and Antimicrobial Resistance program summarizing trends in antibiotic resistance for gram-negative organisms from inpatients and outpatient isolates across Nebraska. **This report is NOT intended to replace facility-specific antibiograms**, but can be used by local health departments and facilities to understand regional susceptibility trends. This report includes:

- **Nebraska Statewide Gram-Negative Antibiogram**
- **Local Health Department Gram-Negative Antibiograms**
- **Antibiotic Susceptibility Heat Maps**
- **Trends in Gram-Negative Susceptibility in Nebraska**



Report Link

Best Practices for Using Antibiograms

- **Use antibiogram data in conjunction with other surveillance (e.g., NHSN, case reports, antibiotic use data)**
- **Track year-over-year trends to identify shifts in resistance and investigate significant changes**
- **Review facility antibiotic guidance (order sets) annually**
- **Collaborate with micro lab, pharmacy, and infection prevention to interpret and communicate findings**

November 18-24, 2025

2025 US ANTIBIOTIC AWARENESS WEEK

USAAW is almost here and is a great opportunity to get staff involved with antibiotic stewardship. Here are some activities your facility can do to participate!

USAAW Toolkit Link

- Provide staff education during in-services or monthly staff meetings
- Bug question trivia with prizes
- Hospital computer screensavers
- Posting flyers throughout the hospital and clinics
- Promote on internal websites/intranet
- Set up a table with posters/flyers in cafeterias or other highly visited locations to target both staff and patients
- Distribute USAWW stickers for staff to wear
- Create short videos for social media/local news outlets
- Digital street signage
- Newsletter articles
- Highlight recent accomplishments of the antibiotic stewardship team
- Promote current stewardship initiatives

Pictured here: Several of the Nebraska ASAP and ICAP Team Members - Going Purple for USAAW!