Asymptomatic bacteriuria in institutionalized elderly people: evidence and practice

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therapy will remain problematic. Absence of such information, optimizing antimicrobial provincial health budgets or national funding bodies. In the able, to date, for this type of assessment either through require appropriate resources. Funding has not been avail-

table in long-term care setting. Such studies are complex and will long-term care setting. Such studies are complex and will require not only education but also a clearer description of outcomes if antimicrobial therapy is withheld, more targeted use of diagnostic testing, and highly restrictive antimicrobial use programs. Increasing the appropriate use of antimicrobials in this population may require us to accept that some residents who may benefit from antimicrobial treatment will not receive it in a timely fashion. Are we ready to accept nontreatment? Perhaps not, but the study by Walker and colleagues moves us forward in exploring the complexity of antimicrobial therapy in the long-term care facility and some of the barriers to optimizing patient care in this setting.

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References


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