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Skin superdrug stalls march of resistant bugs

A POWERFUL new antibiotic that slashes treatment time from weeks to just 30 minutes is to be offered to sufferers of common but difficult-to-tackle skin infections.

It will allow sufferers to be immediately discharged so that they can recover at home – reducing the demand for hospital beds – and, crucially, it may also help to stem the tide of antibiotic resistance.

The recently licensed drug Xydalba has been approved to treat conditions such as cellulitis, an infection of the deep layers of the skin, wound infections and abscesses. These are collectively known as acute bacterial skin and skin structure infections (ABSSSI) in adults.

There are more than 290,000 estimated cases of serious skin infections in the UK, with 79 per cent receiving antibiotics as a first-line treatment.

Cellulitis alone accounts for eight per cent of emergency hospital admissions.

However, the commonly prescribed drugs for these conditions must be given via intravenous (IV) infusion several times a day, requiring patients to be admitted for sometimes lengthy stays. There are also

By **Christine Fieldhouse**

specialist outpatient parenteral antimicrobial therapy (OPAT) clinics that offer infected patients these drips, but these must be visited every day for up to a fortnight.

Xydalba is delivered via a cannula in the arm in either one large dose or as two doses a week apart, all taking 30 minutes.

It has been developed to target only a specific type of bacteria, unlike other antibiotics which work on a broad range of infections. The government has been calling on drug manufacturers to develop more of these co-called narrow-spectrum antibiotics in a bid to halt the rise of drug-resistant bugs.

It is thought that using less specific antibiotics leads to resilient bacteria surviving and then spreading and leading to harder-to-treat infections.

Consultant microbiologist Professor Alistair Leanord, of the University of Glasgow, said Xydalba will not only free up hospital beds, it will also make treatment much more convenient for patients.

'People who might not get to a clinic every day or three times a week can be treated adequately with one dose of this drug. It will

benefit people who need to be at home, not in hospital, and people with mobility problems who would find it difficult getting to an OPAT centre every day for up to a fortnight.'

He added: 'Inpatients with IV lines used three or four times a day are at risk of infections like MRSA, which require expensive treatment. And beds for these patients cost between £500 and £1,000 per day.'

Former chef David Johnston, 35, from Aberdeen, has had two rounds of treatment – four infusions – since May.

He was diagnosed with cellulitis in December 2015 and has had four spells in Aberdeen Royal Infirmary, lasting from ten days to two weeks.

During his last relapse, he received the new drug and was back home within two hours. The infection has now cleared up.

'It's so much easier to go in for a 30-minute treatment and then go straight home,' said Mr Johnston, who lives with his 79-year-old mother Pearl.

'My mum is getting to the stage where she needs someone here for her, and obviously I can't look out for her when I'm in hospital for a fortnight at a time.'

The treatment, which costs the NHS about £1,700 per patient, is being rolled out in Scotland.