

STATEMENTS EXCLUDED AFTER VOTATION

Question 1.3

Is evaluation by an infectious disease specialist needed for patients with infected WON?

Statement

I-EUS group suggests evaluation by an infectious disease specialist for patients with infected WON.

Low-quality evidence; weak recommendation. Agreement 72%

Comments

Infected WON is also considered a strong indication for endoscopic drainage, and microbiological samples are routinely obtained to drive antimicrobial choice during fistula creation; however, little data are available regarding DEN sessions; if not available, empirical broad-spectrum antimicrobial therapy is commonly used. Bacteriemia originates in the gastrointestinal tract and is predominantly caused by the translocation of enteric bacteria from the gut into the pancreatic tissue. The prevailing microbial findings on index endoscopy were enterococci (45%), Enterobacteriaceae (42%), and fungi (22%) [1] [2]. Faced with the growth of resistance to multiple antimicrobial agents [3], a microbiological culture for tailored antimicrobial therapy and consultation with an infectious disease specialist are suggested.

REFERENCES

1. Negm, A.A., et al., *Microbiologic analysis of peri-pancreatic fluid collected during EUS in patients with pancreatitis: impact on antibiotic therapy*. *Gastrointest Endosc*, 2013. **78**(2): p. 303-11.
2. Wurstle, S., et al., *Changes in pathogen spectrum and antimicrobial resistance development in the time-course of acute necrotizing pancreatitis*. *J Gastroenterol Hepatol*, 2019. **34**(12): p. 2096-2103.
3. Magiorakos, A.P., et al., *Multidrug-resistant, extensively drug-resistant and pandrug-resistant bacteria: an international expert proposal for interim standard definitions for acquired resistance*. *Clin Microbiol Infect*, 2012. **18**(3): p. 268-81.