

Amoxicillin-clavulanate safe and effective compared with metronidazole-with-fluoroquinolone for diverticulitis

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Treating diverticulitis in the outpatient setting with the antibiotic combination amoxicillin-clavulanate may reduce the risk for fluoroquinolone-related harms without adversely affecting diverticulitis-specific outcomes. As such, physicians may want to consider choosing amoxicillin-clavulanate over metronidazole-with-fluoroquinolone for patients with a first occurrence of diverticulitis. Findings from two nationwide cohort studies are published in *Annals of Internal Medicine*.

Uncomplicated <u>diverticulitis</u> is often managed in the outpatient setting with antibiotics to expedite recovery from the acute episode and reduce the risk for obstruction, abscess, or perforation. The two most commonly prescribed antibiotic regimens for this purpose are a combination of metronidazole and a <u>fluoroquinolone</u> or amoxicillin-clavulanate only. Despite being commonly prescribed for diverticulitis, the effectiveness and harms of these <u>antibiotics</u> remain unknown. This is a critical gap because the U.S. Food and Drug Administration has recommended that fluoroquinolones be reserved for use in conditions with no alternative treatment options because of the risk for potentially permanent and disabling fluoroquinolone-related adverse effects.

Researchers from the University of North Carolina School of Medicine studied two nationwide claims databases to compare the effectiveness of treating patients at the first occurrence of outpatient diverticulitis with either a combination of metronidazole and a fluoroquinolone or



amoxicillin-clavulanate alone for the prevention of diverticulitis-related inpatient admission, urgent surgery, elective surgery, and emergency department visits. In addition, the researchers sought to assess the comparative risk for Clostridioides difficile infection (CDI) associated with these treatments. They found that amoxicillin-clavulanate was as effective as treatment with metronidazole-with-fluoroquinolone and there were negligible differences between groups in risk for the adverse outcomes measured.

According to the researchers, these findings suggest that physicians may want to consider choosing amoxicillin-clavulanate over metronidazole-with-fluoroquinolone to reduce the risk for serious harms associated with fluoroquinolone use, including CDI.

More information: *Annals of Internal Medicine* (2021). https://www.acpjournals.org/doi/10.7326/M20-6315

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