

中文題目：預防性給予第一代抗生素Cefazolin和第三代抗生素Ceftriaxone對於經內視鏡治療肝硬化合併急性胃食道靜脈瘤出血病患的效果比較

英文題目：Comparison of cefazolin and ceftriaxone as prophylactic antibiotic in cirrhotic patients with acute variceal hemorrhage after endoscopic interventions

作者：吳鎮琨 王景弘 李禎祥 吳耿良 戴維震 盧勝男 胡琮輝 蔡成枝*

服務單位：高雄長庚紀念醫院內科

Background: Short-term antibiotic prophylaxis such as norfloxacin or intravenous ciprofloxacin and ceftriaxone should be prescribed in cirrhotic patients with gastrointestinal hemorrhage but little is known about the effect of intravenous cefazolin, which also covers wide range of common causative bacteria. Current study aimed to compare intravenous cefazolin and ceftriaxone on the outcome of cirrhotic patients with acute variceal hemorrhage after endoscopic interventions.

Materials and Methods: One hundred and eleven patients (Male/Female = 73/38, Age: 59.3 ± 13.9) out of 301 prospective registered cirrhotic cohort with acute variceal bleeding who received endoscopic procedures were enrolled from July 2009 to March 2012 after excluding those patients with signs of infection, use of other kinds of antibiotics. They were then divided into two groups: group A (n=58, received intravenous Cefazolin 1g q8h for 2~7 days), and group B (n=53, received intravenous Ceftriaxone 1g q12h for 2~7 days). The end points were incidence of patients with infections, hospital days, time of rebleeding and death.

Results: There was no significant difference between the two groups with respect to any of the clinical and laboratory data, infections rate, hospital days, actuarial probability of remaining free of overall rebleeding and mortality. However, in the subgroup analysis, actuarial probability of remaining free of rebleeding was higher in group B than A ($P=.024$) among Child's B/C cirrhotic patients but not among Child's A cirrhotic patients ($p=.609$).

Conclusions: This study suggests that the use of intravenous cefazolin as prophylactic antibiotics may be as efficacious as intravenous ceftriaxone in reducing infections, hospital days, and mortality among cirrhotic patients with acute variceal hemorrhage after endoscopic treatment. However, when disease severity is concerned, intravenous cefazolin and ceftriaxone were equally effective in preventing rebleeding for Child's A cirrhotic patients but not for advanced disease patients (Child's B/C) among whom ceftriaxone is still the better option.