# Adherence to the AUA penile prosthesis antibiotic prophylaxis guidelines in diabetic patients is associated with significantly higher risks of device infection

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## **Background**

- Rates of postoperative infection after penile prosthesis implantation (PPI) range between 1-3%.
- Patients with diabetes mellitus (DM) are at increased risk for infection.
- Both AUA and EAU guidelines recommend antibiotic prophylaxis before PPI.
  - \*No randomized trials that assess the efficacy of these recommendations
- AUA:
  - Aminoglycoside + Vancomycin or 1<sup>st</sup>/2<sup>nd</sup> generation Cephalosporin (Gentamicin + Vancomycin or Cephalexin)
  - \*Alternative option includes EAU recommendations.
- EAU:
  - Aminopenicillin + Beta Lactamase Inhibitor (Ampicillin + Sulbactam)

We sought to investigate the use of guideline adherent prophylaxis in preventing infection in DM men undergoing primary PPI.

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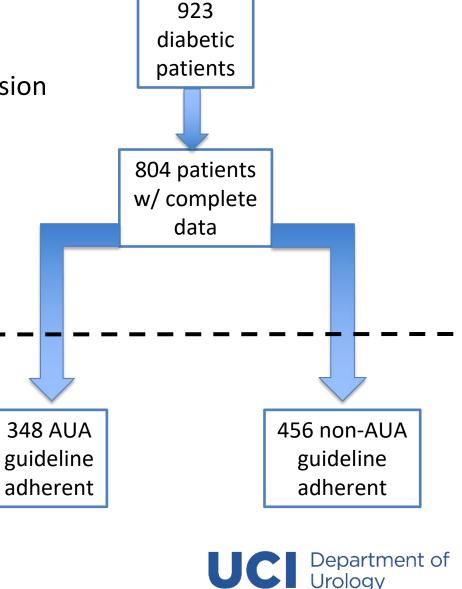
### **Methods**

- 1. Primary outcome: post-operative infection
- 2. Secondary outcomes: post-operative explantation and revision

"Adherence to guidelines" = AUA recommendations w/out additional agents

Stratification by antibiotic prophylaxis

\*None treated according to EAU guidelines.



## **Results**

	AUA Guideline		Non-AUA Guideline		
	348		456		р
Demographics	Mean	SD	Mean	SD	
Pre-op Blood Glucose (mg/dL)	140	45	156	53	<0.001*
Hemoglobin A1C (%)	7.2	1.3	7.5	1.5	0.036
Age (years)	61.9	8.4	59.2	9.1	<0.001*
Body Mass Index (kg/m²)	31.3	5.6	30.5	5.3	0.063
Duration of Diabetes (years)	12.5	8.6	12.9	9.2	0.786
Outcomes	N	%	N	%	
Infections	22	6.3	8	1.8	<0.001*
Explantations	29	8.3	9	2.0	<0.001*
Revisions	27	7.8	30	6.6	0.512
					Donoute



# **Results (continued)**

	В	S.E.	Wald	df	Sig.	Exp(B)	95% C.I.for EXP(B)	
							Lower	Upper
AUA Guidelines	1.752	0.655	7.155	1	0.007	5.764	1.597	20.806
Preop A1c (cont.)	0.033	0.208	0.025	1	0.873	1.034	0.688	1.554
Preop Glucose (cont.)	-0.005	0.006	0.685	1	0.408	0.995	0.983	1.007
Age (cont.)	-0.028	0.028	0.961	1	0.327	0.973	0.92	1.028
DM-Related Complications	0.814	0.499	2.659	1	0.103	2.257	0.848	6.003
Approach	-0.585	0.766	0.584	1	0.445	0.557	0.124	2.499

<u>6x greater risk</u> of post-operative infection (OR: 5.76, p = 0.007).



#### **Infection Data**

Out of 804 patients, 30 had a post-operative infection.



#### Breakdown of Cultures:

Gram Positive	Gram Negative	Anaerobic	Fungi
16 (73%)	7 (32%)	4 (18%)	3 (14%)

<sup>\*30%</sup> of cultures grew multiple organisms.



#### **Conclusions**

First line AUA guideline antibiotic prophylaxis was not as effective at preventing infections in diabetic patients compared to other regimens.

#### Need for broader coverage

- 32% of cultures with anaerobe or fungus not accounted for in current guidelines.
- Increasing microbial resistance
  - Superselection for certain microbials due to antibiotic impregnated implants
  - Addition of a fluoroquinolone reduced infection and explantation rates.
- Inadequate dosing
  - Most commonly isolated organism Staphylococcus should be covered by Vancomycin.
  - Weight based dosing of Vancomycin (15mg/kg)
- Alternative regimens to consider
  - Triple coverage with a fluoroquinolone that has anaerobe coverage
  - Utilizing a beta-lactamase inhibitor in combination with vancomycin
  - Addition of an antifungal in select patients at risk

