Infections: A Systematic Review of the Literature
Efficacy of Cefoperazone Sulbactam in Patients with Acinetobacter baumannii Infections

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According to the latest guidelines by the Infectious Disease Society of America (IDSA), there is no defined standard of care for Acinetobacter baumannii infections, especially the ones with carbapenem resistant phenotypes. The IDSA guidelines do not provide recommendations for the treatment of Acinetobacter baumannii infections, and there is limited evidence available on the efficacy of different antimicrobial agents.

However, the authors conducted a systematic review of the literature to evaluate the efficacy of cefoperazone sulbactam, a beta-lactam beta-lactamase inhibitor combination, in patients with Acinetobacter baumannii infections.

The authors searched various databases for studies that evaluated the efficacy of cefoperazone sulbactam in patients with Acinetobacter baumannii infections. They included studies that used cefoperazone sulbactam as monotherapy or in combination with other antimicrobial agents.

The authors found that cefoperazone sulbactam has shown promising results in treating infections caused by Acinetobacter baumannii. In most cases (70% clinical cure on average), cefoperazone sulbactam was effective in treating infections caused by Acinetobacter baumannii. Higher cure rates were observed in patients with carbapenem resistant phenotypes.

The authors concluded that cefoperazone sulbactam can be considered as a potential treatment option for patients with Acinetobacter baumannii infections, especially in cases where the infection is caused by carbapenem resistant strains.

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