



## Summary of Changes – May 2006

# Community-Acquired Pneumonia in Adults

### **Algorithm**

Gatifloxacin was removed from the algorithm and replaced with levofloxacin.

\* #10: This annotation was revised. A recent randomized, controlled trial in elderly patients showed similar overall efficacy between moxifloxacin and levofloxacin, though moxifloxacin had somewhat faster response at day 3-5 (Anzueto 2006). However, due to a lack of randomized comparative trials demonstrating clear superiority of moxifloxacin and the availability of several studies supporting levofloxacin efficacy, levofloxacin has been included in the algorithm as an option. This topic will be addressed again once the new IDSA/ATS guidelines are released in late 2006.

Gatifloxacin is contraindicated in diabetic patients due to reports of hypo and hyperglycemia. Thus the use of gatifloxacin has been removed from the guideline.

Appendix A: \$\$\$ replaced the cost of antibiotics.

### **Priority Aims & Suggested Measures, Measurement Specifications**

None

### **Support for Implementation**

The page of Available Resources was revised.

*\*An asterisk indicates any changes in clinical practice recommendations*