Material and methods A before and after ASP intervention was implemented in an oncology department in a tertiary hospital. Pre-intervention prescription characteristics were analysed through repeated point prevalence surveys in the previous year. The intervention was initiated in February 2019 based on a weekly ward round where non-tax advice was given to the oncologists about their active antibiotic prescriptions. Prescription features, rates of adherence to local guidelines and type and acceptance of the recommendations given to stop or de-escalate were recorded.

Results A total of 62 and 73 prescriptions were included in the pre- and post-intervention periods, respectively. Table 1 describes the prescription characteristics in both periods. Adherence to local guidelines was 51% and 59% in the pre- and post-intervention periods, respectively (p=0.39).

In the intervention period, 26% of prescriptions were stopped and 12% de-escalated. Acceptance was 99%.

Conclusion and relevance An ASP weekly intervention in the oncology department showed a slight increase in adherence to local antibiotic guidelines. Nevertheless, this improvement was not statistically significant due to the short follow-up period and small sample size. Further studies are required to corroborate this improvement.

REFERENCES AND/OR ACKNOWLEDGEMENTS
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