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THE IMPACT OF ORAL METRONIDAZOLE ON THE INCIDENCE OF *CLOSTRIDIUM DIFFICILE* INFECTION IN HIGH-RISK PATIENTS (A1)

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Prior exposure to antibiotics is a primary risk factor for *Clostridium difficile* infection (CDI), especially with broad-spectrum agents or combination use. Due to recent increases in both incidence and severity of CDI, there is a need to diminish its prevalence. Nonpharmacological methods including hand hygiene, disinfection and isolation precautions are the only strategies recommended. Use of oral metronidazole prophylaxis to prevent CDI is currently unproven. The aim of this study is to determine if empiric oral metronidazole reduces the incidence of CDI in hospitalized patients receiving high risk antibiotic regimens. CDI is defined as a positive *Clostridium difficile* cell cytotoxic stool assay and/or positive stool culture. High risk antibiotic regimens are compiled per medical literature and in accordance to protocol at VA San Diego Healthcare System (VASDHS). Secondary endpoints include assessing other individual predictors of CDI. This study is a retrospective chart review of hospitalized patients treated at VASDHS who received oral metronidazole in combination with high-risk antibiotic regimens from December 2006 through December 2008. Data collected includes baseline characteristics, length of hospital stay, duration and dose of oral metronidazole and additional antibiotic use in addition to results of assay and/or stool culture. Results and conclusion will be presented.