Is penicillin allergy de-labelling about to find its place in UK antimicrobial stewardship strategy?

Authors: Neil Powell, Mathew Upton, Bridie Kent, Sarah Tonkin-Crine and Jonathan Sandoe

Penicillin allergy records are common, often incorrect and limit antibiotic treatment options for patients. Moreover, there are several patient and health system harms associated with penicillin allergy records, which include increased length of hospitalisation, higher rates of ICU admission and hospital readmission, higher risk of multidrug-resistant or opportunistic infection, increased mortality risk, and higher drug and/or hospital-related costs.

Penicillin allergy assessment has traditionally been undertaken by allergists/immunologists and involves an accurate clinical history, serum testing for specific IgE to penicillin and penicillin skin testing. If these tests are negative then an oral penicillin challenge test dose is prescribed and the patient observed for an hour. If these tests are negative then an oral penicillin challenge without prior skin testing, can be carried out for low-risk patients and is a safe and effective de-label strategy.

The paucity of allergy services globally versus the prevalence of penicillin allergy labels has led to exploration of non-specialist means of ‘de-labelling’ (assessing penicillin allergy and removing incorrect labels where appropriate). Relatively recently it has been recognised that undertaking a ‘direct oral challenge’, ie a drug provocation test without prior skin testing, can be carried out for low-risk patients and is a safe and effective de-label strategy. Recognition of the associated harms of incorrect penicillin allergy records has led to exploration of non-specialist allergy de-labelling. The early adoption of penicillin allergy assessment by non-allergists in the USA, Australia and New Zealand and the provision of toolkits to enable non-allergy healthcare workers to undertake penicillin allergy de-labelling in hospitals has facilitated early adoption in these countries. The publication of the recent BSACI guidelines will empower non-allergists to design penicillin allergy assessment interventions and facilitate widespread adoption of penicillin allergy assessment and de-label as a standard of care for NHS patients.

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References


Address for correspondence: Mr Neil Powell, Pharmacy Department, Royal Cornwall Hospital, Truro TR1 3LJ, UK. Email: neil.powell2@nhs.net Twitter: @twitterhandle