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On Drugs and Therapeutics

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IN THIS ISSUE (starts on next page)

**In Brief: Recommendation for Earlier Antibiotic
Prophylaxis for Cesarean Delivery p 80**

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IN BRIEF

Recommendation for Earlier Antibiotic Prophylaxis for Cesarean Delivery

The American Congress of Obstetricians and Gynecologists (ACOG) has announced a new recommendation for antibiotic prophylaxis during cesarean delivery.¹ Currently most women receive a single dose of prophylactic antibiotics after the umbilical cord has been clamped to prevent antibiotics from crossing over to the newborn. The new recommendation is for women giving birth by cesarean section to routinely receive antibiotics within one hour before the start of surgery. In the case of an emergency cesarean delivery, prophylaxis should be started as soon as possible.

Recent studies have found a lower incidence of endometritis and wound infection with preoperative antibiotic administration compared to administration post-clamping.^{2,4} Whether widespread adoption of this practice could increase neonatal morbidity by masking the source of sepsis or by increasing the prevalence of resistant organisms remains to be determined.

The prophylactic antibiotic for cesarean section is cefazolin 1-2 g IV. For patients allergic to penicillins and cephalosporins, clindamycin with gentamicin would be a reasonable alternative.

1. The American College of Obstetricians and Gynecologists Committee on Obstetric Practice. Committee Opinion no. 465: Antimicrobial prophylaxis for cesarean delivery: timing of administration. *Obstet Gynecol* 2010; 116:791.
2. MM Constantine et al. Timing of perioperative antibiotics for cesarean delivery: a metaanalysis. *Am J Obstet Gynecol* 2008; 199:301.
3. FM Smaill and GML Gyte. Antibiotic prophylaxis versus no prophylaxis for preventing infection after cesarean section. *Cochrane Database Syst Rev* 2010: CD007482.
4. SA Sullivan et al. Administration of cefazolin prior to skin incision is superior to cefazolin at cord clamping in preventing post cesarean infectious morbidity: a randomized controlled trial. *Am J Obstet Gynecol* 2007; 196:455.

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