



Antibiotic Therapy for Critically Ill Patients in the Age of COVID-19

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Message from the Guest Editors

Dear Colleagues,

Treatment guidelines for community-acquired pneumonia recommend initial empiric antibiotic therapy for possible bacterial infection or co-infection, given that they often coexist and there are no clear diagnostic tests for determining if the pneumonia is solely due to a virus at the time of onset. On the other hand, treatment decisions must be weighed taking into account the rise of multidrug-resistant bacteria and complications associated with antibiotic use. Currently, there are no clear estimates on the incidence of bacterial co-infection in patients with COVID-19 and no clinical trials have been conducted on the use of empiric antibiotics in these patients. Some macrolides, teicoplanin and fluoroquinolones have been analyzed for their potential capacity to bind to SARS-CoV-2. We aimed to evaluate original articles and reviews to improve the knowledge on this interesting topic.

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Message from the Editor-in-Chief

There are very few fields that attract as much attention as scientific endeavor related to antibiotic discovery, use and preservation. The public, patients, scientists, clinicians, policy-makers, NGOs, governments, and supra-governmental organizations are all focusing intensively on it: all are concerned that we use our existing agents more effectively, and develop and evaluate new interventions in time to face emerging challenges for the benefit of present and future generations. We need every discipline to contribute and collaborate: molecular, microbiological, clinical, epidemiological, geographic, economic, social scientific and policy disciplines are all key. *Antibiotics* is a nimble, inclusive and rigorous indexed journal as an enabling platform for all who can contribute to solving the greatest broad concerns of the modern world.

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