



Antibiotic Usage in Acute Situations

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Message from the Guest Editors

We should be using antibiotics when appropriate, at the appropriate dose. The unnecessary use of antibiotics not only subjects patients to drug side-effects, it drives bacterial resistance. Inappropriate dosing allows for bacterial growth, with concomitant poor outcomes.

Keeping these issues in mind, within the acute setting of the Intensive Care Unit, each day, we grapple with various decisions: firstly, when to start antibiotics, i.e., most of our patients will have a temperature and raised white blood cell count, and secondly, how to dose each patient appropriately.

The syndromes of inflammation in ICU are often difficult to differentiate from infections. In this edition of *Antibiotics*, a number of manuscripts will describe these differences and shed light on not only when to use antibiotics, but when not to use such important drugs unnecessarily. The second section of the edition concentrates on the appropriate dosing of antibiotics in acute settings, getting enough of the drug to the site of the proposed infection.





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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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