selective digestive decontamination - selective decontamination of the digestive tract is an infection prophylaxis regimen that was introduced into intensive care in 1984 - controversy remains about the effects of SDD on mortality & on antibiotics resistance

principle - SDD aims at eradicating the potentially pathogenic organisms from the mouth & stomach while preserving the indigenous anaerobic flora to prevent overgrowth with resistant bacteria & yeasts

regime - the most frequently used regimen consists of topical polymyxin E, tobramycin & amphotericin B

advantages (i) a lower incidence of pneumonia in SDD treated patients (ii) a reduction in mortality in SDD treated patients (iii) initial data suggesting benefit in trauma patients

disadvantages (i) potential for antibiotic resistance (although no clear evidence exists) (ii) efficacy & safety has only been shown in ICUs with a low prevalence of MRSA and/or VRE. In areas were MRSA is common SDD should be considered an experimental therapy