Acute bacterial skin and skin structure infections (ABSSSI) include a variety of conditions, such as cellulitis, skin abscesses, and infected wounds. The treatment of ABSSSI is crucial due to the potential for severe complications.

We conducted a systematic review and network meta-analysis to compare various treatments for ABSSSI. We included 15 eligible trials, which were assessed across a range of treatment time periods. The standard therapy for complicated MRSA infections is usually linezolid or teicoplanin, but newer agents such as daptomycin and tedizolid may provide an alternative.

The network meta-analysis results suggest that tedizolid is superior to vancomycin and equivalent to linezolid for clinical response at end of treatment (EOT) and post-treatment/4 weeks following treatment (PTE/TOC) in all trials.

The findings of this study have important implications for the treatment of ABSSSI, and they provide evidence to guide clinical decision-making. Further research is needed to confirm these findings and to explore the long-term outcomes of these treatments.

**Limitations**

- This study was based on observational data and may have limitations due to the inherent biases and confounders.
- The analysis was limited by the quality and quantity of the available data.
- The generalizability of the results may be limited to specific patient populations and settings.

**Conclusions**

- Tedizolid is superior to vancomycin and equivalent to linezolid for clinical response at EOT and PTE/TOC.
- Tedizolid may provide an alternative treatment option for ABSSSI, especially for MRSA infections.
- Further research is needed to confirm these findings and to explore the long-term outcomes.

**References**