

Decision support reduces antibiotic usage for bronchitis

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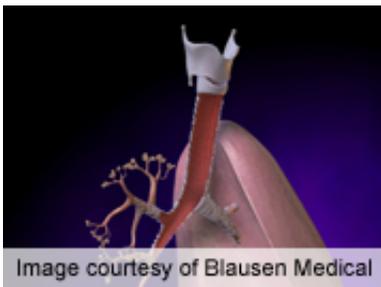


Image courtesy of Blausen Medical

Decision support strategies can help reduce the over-prescription of antibiotics for acute bronchitis in primary care settings, according to a study published online Jan. 14 in *JAMA Internal Medicine*.

(HealthDay)—Decision support strategies can help reduce the over-prescription of antibiotics for acute bronchitis in primary care settings, according to a study published online Jan. 14 in *JAMA Internal Medicine*.

Ralph Gonzales, M.D., M.S.P.H., from the University of California in San Francisco, and colleagues compared the effect of two decision support strategies on [antibiotic treatment](#) of uncomplicated acute bronchitis in a randomized study involving 33 primary care practices in an integrated [health care system](#). The practices were randomized in a 1:1:1 ratio to receive printed decision support for acute cough illness, computer-assisted decision support through [electronic medical records](#), or control sites. Intervention sites also received clinician education and

feedback on prescribing practices as well as patient education brochures. Antibiotic prescription rates were compared for the winter period following introduction of the intervention and the previous three winter periods.

The researchers found that during the intervention period the percentage of adolescents and adults prescribed antibiotics declined at the printed decision and computer-assisted support sites (from 80.0 to 68.3 percent and from 74.0 to 60.7 percent, respectively), while at control sites there was a slight increase (from 72.5 to 74.3 percent). The differences in prescribing at the intervention sites were significant compared to the control sites, after adjustment for patient and clinician characteristics. There were no significant other differences between the intervention sites.

"In conclusion, an evidence-based algorithm to guide management of acute bronchitis can reduce the [overuse of antibiotics](#) in primary care settings, but the mode of implementation does not seem to influence the magnitude of effect," the authors write.

Two authors disclosed financial ties to the pharmaceutical and medical informatics industries.

More information: [Abstract](#)

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