

Better communication reduces prescriptions for antibiotics

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(HealthDay)—Neither C-reactive protein testing nor enhanced physician communication training resulted in reduced office visits, but enhanced communication training resulted in less prescribing for antibiotics for respiratory tract infections, according to research published in March/April issue in *Annals of Family Medicine*.

Jochen W.L. Cals, M.D., Ph.D., of Maastricht University Medical Centre in the Netherlands, and colleagues conducted a clustered, randomized controlled study with a 3.5 year follow-up to assess the long-

term effect of family physicians' use of C-reactive protein (CRP) point-of-care testing and/or enhanced physician communication skills on office visit rates and [antibiotic prescriptions](#) for respiratory tract infections.

According to the researchers, there were no differences in the mean number of physician per patient per year (PPPY) visits for respiratory tract infections between CRP and no CRP testing. The mean number of respiratory tract infections was 0.36 and 0.57 PPPY in the enhanced physician communication training group and no training group, respectively, ($P=0.09$). Antibiotic prescriptions were similar between CRP and no CRP test groups. Significantly fewer episodes of respiratory tract infection were treated by antibiotics in [family physicians](#) trained in communication skills than those without training, 26.3 percent versus 39.1 percent ($P=0.02$).

"Training physicians in the use of enhanced communication skills may have a wider long-term effect on the treatment of [respiratory tract infections](#) beyond acute cough to include reduced antibiotic prescribing," the authors write.

One author disclosed receiving travel or speaking fees from two manufacturers of point-of-care C-reactive protein devices.

More information: [Abstract](#)
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