

Researchers aim to improve the use of antibiotics in primary care

February 26 2016



New research led by Bristol NHS CCG and the University of Bristol, aimed at improving the quality of primary care for children with respiratory tract infections (RTIs) will be presented in London today.

Carried out by the Centre for Academic Primary Care (CAPC), the TARGET programme included the largest and most rigorous set of

studies of their kind. RTIs in children are the most common problem managed in primary care internationally. The programme, funded by the National Institute for Health Research Programme Grants for Applied Research Programme, was intended to give clinicians the tools they need to better care for these patients.

The programme found new evidence to help parents, primary care clinicians (doctors and nurses) and policy makers support improved antimicrobial stewardship in primary care.

The main findings of the five-year research programme are:

- Symptoms of [respiratory tract infections](#) in children last longer than many parents and clinicians expect (some for more than 21 days), and that this information is of great value to parents to help them know what to expect after seeing the doctor or nurse
- An important driver of antibiotic prescribing is clinical uncertainty – clinicians will adopt a "treat just in case" strategy when they are unsure if a child's condition could get worse (eg need hospitalisation), and they would welcome any evidence that helps them identify which children will get worse.
- Parents value consistent advice from a trusted source, which addresses their common concerns about their child's RTI, and would value more advice about symptom relief and more precise safety-netting advice.
- Experience and training in recognising severe RTIs, plus more evidence to identify the children at highest and lowest risk of illness deterioration, may help clinicians to identify children most and least likely to benefit from antibiotics.
- The most effective interventions to improve antibiotic use target parents and clinicians during consultations; promote clinician leadership in the intervention design; provide automatic prescribing prompts; and employ delayed prescribing.

Professor Alastair Hay, from CAPC at the University of Bristol, led the programme. He said: "Children with RTIs often receive antibiotics despite the fact that antibiotics will not help the majority of [children's](#) infections. Our research has uncovered why [clinicians](#) prescribe antibiotics; what parents want from a consultation with their GP and what sorts of interventions would help improve the use of antibiotics in [primary care](#). With antimicrobial resistance an ever growing problem, we hope our research will go some way to tackle this issue."

More information: Detailed information for clinicians and policymakers about the research including published papers: [www.bristol.ac.uk/primaryhealth ... chthemes/target.html](http://www.bristol.ac.uk/primaryhealth...chthemes/target.html)

A guide for parents on when to see a GP and how to care for a child with a cough: child-cough.bristol.ac.uk/

Provided by University of Bristol

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