

Should I take antibiotics for that cough that won't go away?

March 29 2016, by Karen Garloch, The Charlotte Observer

Antibiotics are excellent for treating bacterial infections. But viral illnesses? Not so much.

Although this has long been known, it hasn't been a very easy message to get across to people who are sick with [cold symptoms](#) and want something to make them feel better fast.

Over the years, overuse and abuse of [antibiotics](#) have resulted in a big problem. Many bacteria have become resistant to the antibiotics that once were able to kill them. Newer, stronger antibiotics have been developed to fill the gap, but some bacteria are even resistant to the most powerful agents we have.

That's why health officials at the federal, state and local levels have been waging a campaign to educate both doctors and patients about the dangers of taking antibiotics when they aren't really warranted.

A few weeks ago, I wrote about the long-lasting hacking coughs that have accompanied so many [upper respiratory infections](#) for so many people I know. I mentioned what I've heard so many times: That antibiotics should be avoided unless a viral infection lingers and turns into a bacterial infection, such as bronchitis, sinusitis or pneumonia.

In response, I heard from Dr. Janice Huff, a Charlotte, N.C., family physician, who pointed out that most bronchitis is viral and that antibiotics are often inappropriately prescribed. "Too many people think

they need antibiotics for bronchitis, and we need to combat this ignorance."

Although viral infections are sometimes followed by bacterial infections, which may be treated with antibiotics, Huff said distinguishing one from another is very difficult.

For many years, patients with upper respiratory infections have been coming to doctors after being sick for a day or two and asking for antibiotics. "Two days of cold symptoms is not usually bacterial," Huff said.

She said doctors should not consider giving antibiotics unless a patient has already been sick for 10 to 14 days or has complications such as high fever and severe facial pain. Such patients should see their doctors because they may have developed bacterial infections. "There is a small percentage of people who really do need antibiotics," Huff said. "I don't want anybody not to take them when they need them."

Some companies offer rapid tests for influenza and other viruses, but doctors say they're not always accurate and wonder if the expense is worth it, especially because the illness would likely have improved on its own with time.

But it takes a determined doctor to refuse antibiotics for patients who have paid to come to the office and expect a prescription.

"It takes a lot longer to have the conversation with people about why we're not going to give the antibiotics," Huff said. "A lot of doctors just give antibiotics because it's faster and easier.But it's wrong. We should spend time talking to each other to make the right decision."

Dr. David Priest, medical director for infection prevention for Novant

Health, leads the Winston-Salem, N.C.-based hospital system's effort to reduce inappropriate antibiotic use. He says patients should be as concerned as [doctors](#).

For example, if you give a healthy volunteer an unneeded antibiotic, his remaining natural bacteria will be resistant to that specific antibiotic for six to 12 months, Priest said. The antibiotic will have killed off susceptible bacteria, leaving only the resistant ones.

"The danger is that if you do that many times over, the whole population will be resistant to the last antibiotic they got," Priest said. "If the public and the physicians thought about it that way, they would be a little more hesitant to take antibiotics unless it was absolutely necessary."

One significant problem is the rise of C. diff, short for Clostridium difficile, a diarrheal infection most likely to affect patients in hospitals or long-term care centers. Victims often have conditions that required treatment with antibiotics, and those drugs killed off the intestinal bacteria that had kept C. diff bacteria in check. The infection is potentially life-threatening because C. diff has also become resistant to many antibiotics.

It's one more reason why everyone should think seriously before assuming antibiotics are the answer.

"We live in a world that wants things fixed quickly," Priest said. "People underestimate how long it takes to get over a bad viral bronchitis. Weeks and weeks and weeks."

©2016 The Charlotte Observer (Charlotte, N.C.)
Distributed by Tribune Content Agency, LLC.

Citation: Should I take antibiotics for that cough that won't go away? (2016, March 29) retrieved

2 May 2024 from <https://medicalxpress.com/news/2016-03-antibiotics-wont.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.