

Study identifies factors that affect antibiotic prescribing for acne

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Multiple salient factors affect long-term antibiotic prescribing practices for acne, according to a study [published](#) in *JAMA Dermatology*.

Ronnie A. Festok, from the Emory University School of Medicine in Atlanta, and colleagues conducted a [qualitative study](#) assessing data collected from stakeholders (dermatologists, infectious disease physicians, dermatology resident physicians, and nonphysician clinicians) via an [online survey](#) and semistructured video interviews to identify salient barriers and facilitators to long-term antibiotic prescriptions for acne treatment. Thirty participants were included in the analysis.

The researchers found that knowledge of antibiotic guideline recommendations was high among participants in the study, and antibiotic stewardship was considered to be a professional responsibility. Perceived lack of evidence to justify change in dermatologic practice, difficulty navigating patient demands and satisfaction, discomfort with discussing contraception, iPLEDGE-related barriers, and the absence of an effective system to measure progress on antibiotic stewardship were the five salient themes that affected long-term antibiotic prescriptions.

"The findings of this qualitative study indicate that while clinicians consider antibiotic stewardship a professional responsibility and they are aware of antibiotic stewardship guidelines in acne treatment, future interventions must address the need for robust evidence-based knowledge on the clinical implications of long-term antibiotic prescriptions for [acne](#) and clearly disseminate this information to clinicians and patients," the authors write.

Several authors disclosed ties to the [pharmaceutical industry](#).

More information: Ronnie A. Festok et al, Barriers and Facilitators Affecting Long-Term Antibiotic Prescriptions for Acne Treatment, *JAMA Dermatology* (2024). [DOI: 10.1001/jamadermatol.2024.0203](https://doi.org/10.1001/jamadermatol.2024.0203)

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