

# Knowledge & Expectations Regarding the Role of Antibiotic Treatment in URIs

Dr. Abdullah Alghasham College of Medicine Qassim University, Saudi Arabia

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# Introduction

- Treatment of upper respiratory infections is a major misuse of antimicrobial therapy
- URIs are usually viral, but many physicians prescribe antibiotics

### The National Ambulatory Medical Care Survey

Indication	<b>No of Prescriptions</b>
Viral URIs	1000 million
Bronchitis	16 million
Otitis media	10 million
Sinusitis	20 million

**NAMCS 1996** 

# Why do physicians prescribe antibiotics in viral infections?

- Good intention: motivated to give best treatment
- Pressure from the patients or their parents
- Fear that a viral infection will lead to a secondary bacterial infection
- Cost and non-availability of investigations
- Inadequate knowledge of diagnostic procedures
- Fear of malpractice and legal issues
- Influence by pharmaceutical companies

Fishman: Principle and Practice of ID

# Influence of Parents on Antibiotic Prescribing

 Patient pressure and demand for antibiotics force physician to prescribe antibiotic and contribute bacterial resistance

WHO. JAMA 2000, 117:245-250.

# Study Aim

#### This study aimed to

 – evaluate parents' expectations, knowledge and beliefs about the role of antibiotics in childhood URIs in order to develop a relevant strategy to control misuse of antibiotics

#### Study Design, Setting, and Participants

- Cross-sectional study was conducted in the winter months of 2004/2005.
- 10 primary health care centers in Qassim, Saudi Arabia.
- A questionnaire to obtain relevant information from those parents:
  - the current illness, reasons for attending and expectations from the visit, knowledge about URIs and role of antibiotics
- Parents of children who attended with URI symptoms were included in the study.
- General practitioners interviewed the parent and filled in the questionnaire according to parent's response

#### Study Design, Setting, and Participants

#### • Inclusion criteria:

- Children from 3 mo to 6 years with symptoms:
  - congested and running nose, cough, sore throat and fever
- First visit for current illness
- Exclusion criteria:
  - Not first visit
  - Fever lasting > 7 days
  - Chronic diseases
  - Earache
  - Children not accompanied by their parents

# RESULT cont.

Socio-demographic Characteristics of Parents		
Characteristics	Number (Percent)	
Escort Parent		
Mother	784 (75%)	
Father	261 (25%)	
Age of parents		
Mother	25.7 ± 5.5 (18-45)	
Father	32.8 ± 5.6 (20-50)	
Education (University)		
Mother	150 (19%)*	
Father	84 (32.2%)	
Saudi Nationality	994 (95.1%)	

\* Statistically significant

# **Description of Current Illness**

- Duration of symptoms:
  - less than 24 hours in 35% of cases
  - only 18% the symptoms lasted more than 4 days before visit
- Severity of illness:
  - moderate in 53%
- Symptoms:
  - Runny nose (87%),
  - Cough (86%)
  - Fever (66%)
- Reason for visit:
  - To get reassurance (95%)
  - To get medication (45%)

#### **Beneficial Effects of Antibiotics**

Characteristics	No (Percent)
Expecting prescribing antibiotics	364 (35%)
Current illness is a self-limited disease	773 (74%)
Antibiotics are beneficial for current illness	679 (65%)
Antibiotics is beneficial to (n=679)	
Relieve symptoms	591 (87%)
Prevent complications	421 (62%)
Shorten course of disease	360 (53%)
Prevent spread infections to others	54 (8%)
Symptoms that necessitate antibiotics prescription (n=679)	
Runny nose & lacrimation	122 (18%)
Sore throat	516 (76%)
Cough	604 (89%)
Fever	631 (93%)

#### Harmful Effects of Antibiotics

Characteristics	No (Percent)
Antibiotics have side effects	783 (75%)
Side effects are evident if taken (n=784)	
For shorted or longer period than prescribed	387 (37%)
Without prescription	449 (43%)
Without following prescribed dose	711 (68%)
Previous experience with antibiotics	
Antibiotics were received in past URIs	470 (45%)
There were complications in past URIs	334 (32%)

#### **Past Faulty Behaviors on Antibiotics**

Behavior (n = 470)	No (Percent)
Used antibiotics without prescription	259 (55%)
Stopped intake when symptoms disappeared	202 (43%)
Saved remaining antibiotics for future use	146 (31%)
Shared use with other household members	108 (23%)

#### **Expectation for Antibiotic Prescription**

- Expectation: 35% of parents (65% think antibiotic is not helpful in current illness)
- Parental expectation for getting antibiotic is significant in:
  - Female > male
  - Less education > higher education
  - One child in family > multiple children
  - Youngest child > older children

# Discussion

- Parents of children with URIs expect to receive antibiotic treatment:
  - Current study 35%
  - Other studies 50-65%

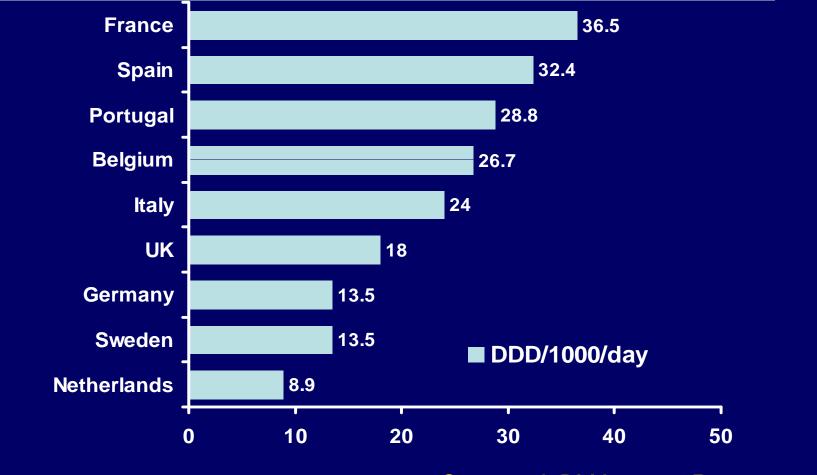
Cummings et al. Emerg Infect Dis. 2005 Braun et al. Arch Fam Med. 2000 Azab AS. Saudi Med J. 2000 Aug

- Explanation for lower expectation:
  - Exclusion ear symptoms
  - Using antibiotics for children not for adult

#### Antimicrobial Use in the Community

- About 80% of antibiotic use is out-side hospitals; up to 80% of this is inappropriate
- Are available without prescription in many countries

#### Non-hospital usage of antibiotics in Europe: defined daily dose/1000/day (1997)



Cars et al. BMJ 2001; **357**:1851–1853

Compliance with antibiotic therapy by American patients

- 54% do not complete the treatment course
- 54% stop the course when they feel better
- 56% miss one or more doses
- 82% prefer once/twice daily regimens
- < 5% tolerate a 14-day regimen</p>

Gallup, 1995

#### What about figures in our communities?

- Stopped intake when symptoms disappeared 43%
- Saved remaining antibiotics for future use 31%
- Shared use with other household members 23%

# Alarming

Used antibiotics without prescription in 55% (prohibited by law)

### Antibiotics on **SALE**

# Impact of the Study

- Education of parents will improve knowledge and awareness about illness of their children
- Educational program for physicians and medical students on prudent use of antimicrobial agents to reduce bacterial resistance

# الجمعية العربية للاستخدام الأمثل للمضادات الميكروبية Arab Alliance for the Prudent Use of Antimicrobials ARAPUA

**Towards Rational Use of Antimicrobials** 

#### First Step To Change

"Never expect anyone to engage in a behavior that serves your values unless you give that person adequate reason to do so."

Charles E. Dwyer

