We asked some clinicians: "How do you deal with patient expectations around antibiotics?"



PATIENT SAYS:		POSSIBLE CLINICIAN RESPONSE:	
I feel really rotten!	→	Yes, I'm sure you do and you look sick too, but feeling rotten doesn't equal a bacterial infection. It's most likely to be viral!	Feeling really sick, sniffles, runny nose, cough ≠ bacterial
I really think I need something.	→	Yes, for sure. You need to stay home & rest for a day. Here is an information hand-out and a script with options for symptom management.	An information hand-out + a "non-Rx" script-pad
But, last time I got antibiotics!	→	In the past, we sometimes used antibiotics, they didn't work, but the practice has given us "superbugs"!	🐺 Superbugs! 🐺
I drove and waited a long time. I don't want to have to come back!	→	Yes. What I could do is give you a provisional prescription, good for a week. Don't fill it now, but if all of the sudden you feel a lot worse, you can fill it without having to come in.	A "watch and wait" prescription option ⁱⁱ
I've been coughing for two weeks	→	It's pretty typical to cough for several weeks after a chest cold due to a virus. Would you like it if I gave you something to help with the cough?	Bronchitis & cough
I've been coughing steady, feverish, and feel like dying.	→	You do look quite unwell. It could just be a chest cold, but we should send you for an x-ray to rule out pneumonia and anything else.	CXR
I think I'd like an antibiotic just in case. Can't go wrong, right?	→	Actually, antibiotics cause a lot more side effects than we realize. There's diarrhea, yeast infections, and occasionally some very serious harms. Plus, when we overuse, we increase the risk of resistant bacteria!	Antibiotic harms: side effects & bacterial resistance

EVIDENCE AROUND REDUCING UNNECESSARY ANTIBIOTICS?

- \cdot Studies have demonstrated patient satisfaction with care for acute bronchitis depends most on physician-patient communication, not antibiotic treatment. $^{\text{iii}, \text{iv}}$
- ${}^{\bullet}$ One study found that the duration of office visits for acute respiratory infection was only one minute longer when antibiotics were not prescribed. ${}^{\vee}$
- A change in antibiotic reimbursement resulted in fewer antibiotics prescribed, and a reduction in the level of antimicrobial resistance.

ONE PHYSICIAN'S SCRIPT AROUND ACUTE BRONCHITIS

I have examined you and I am happy there is no sign of serious illness, which would need an antibiotic today. Most chest colds get better on their own, although the cough may take several weeks to go away completely.

Antibiotics don't seem to make much difference to how quickly most people recover. However, if you feel you are actually getting worse after awhile, taking antibiotics then may be reasonable.

So, here is an antibiotic prescription for you to keep at home. You are quite likely not to need it, but if your symptoms get noticeably worse, you can fill it within 7 days.

ADDITIONAL TIPS FOR GETTING PATIENT BUY-IN

- → Use the term "chest cold" or "viral upper respiratory tract infection" as this makes it easier to convince patients they do not need antibiotics.
- → Viruses commonly make you feel sick all over your body.
- → Viruses are more easily spread from one person to another, so if you are the 3rd person in your house who's sick... it's probably a virus.
- → Fever is how our bodies fight off any infection and not an indication of a bacterial infection.
- → Colored nasal secretions do not equal a bacterial infection! Snot and sputum that becomes yellow/green is a sign your body is fighting off any infection.
- → Most sore throats are viral infections. Strep throat can only be diagnosed by a throat swab.
- → 70-80% of ear infections get better without antibiotics.
- → Antibiotics do not reduce the duration of viral illness, but may cause harms (nausea, diarrhea, allergic reactions, etc.)
- → Always provide a) patient education, b) symptom duration, and c) when to return.
- → Hand washing!! Important for sick contact prevention.

TYPICAL SYMPTOM DURATION FOR SELECT VIRAL ILLNESS

Sore throat, pharyngitis: 6-10 daysCough, acute bronchitis: 2-3 weeks

Patient Pages, Tools, Links: 1) Why didn't I get antibiotics today: http://generations.ourmd.ca/Doctor/secem-att-store.nsf/fa/GFLK-A9WP9V/\$FILE/No-Antibiotics.pdf; 2) ABX Public/Patient Resources & Links: www.RxFiles.ca/ABX; For more information & references, see <a href="https://www.RxFiles.ca/