

MINIMUM USE OF ANTIBIOTICS FOR ACUTE RESPIRATORY TRACT INFECTIONS – VALIDITY AND PATIENT SATISFACTION

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BACKGROUND/AIMS: Antibiotics have been overused for acute respiratory tract infections and recent guidelines have emphasized limiting their use to certain specific situations. This study aims to clarify the exact rate of antibiotic use and patient outcomes and satisfaction under strict adherence to the guidelines proposed by the American College of Physicians.

METHODS: A total of 783 patients diagnosed as having acute respiratory tract infections in primary care clinics from October 2004 to April 2005, 15 to 65 years of age and without any underlying diseases, were enrolled. Symptoms and patient satisfaction were scored on the 5th, 8th and 15th day after their initial visit when treatment under the strict application of the guidelines was begun.

RESULTS: In 691 noninfluenza patients, composed of 554 (80.2%) cases of nonspecific upper airway infection (A), 11 (1.6%) of acute rhinosinusitis (B), 90 (13.0%) of acute pharyngitis (C) and 36 (5.2%) of acute bronchitis (D), rates of antibiotic use were 5.1% (0.2%; (A), 9.1%; (B), 35.6%; (C), 2.8%; (D)) initially, and subsequently, 2.7% (2.5%; (A), 0%; (B), 3.3%; (C), 5.6%; (D)) subsequently. For the remaining 92 influenza patients, no antibiotics were prescribed but oseltamivir was prescribed in 89 (96.7%) patients. Within 7 days, more than 90% of all patients reported symptom relief and expressed satisfaction with the treatment. Moreover, no patients needed emergency room visits or admission.

CONCLUSIONS: Adhering to the guidelines, antibiotic use could be limited to only 5% to 8% of acute respiratory tract infections, mainly acute pharyngitis, without any trouble and with full satisfaction.

Keywords: Common cold, Antibiotics, Acute respiratory tract infections