

Antibiotic Supplement

September 2018

Antimicrobial Resistance

Antibiotic resistance is one of the biggest threats facing us globally **and** locally. In 2016, there were 1.9 million individual primary care prescriptions issued for an antibiotic across Northern Ireland, which is approximately one course of antibiotics per head of population during that year.

Overuse and inappropriate use of antibiotics causes two major problems:

- **Inappropriate use** — leads to antimicrobial resistance (AMR), making infections difficult to treat.
- **Overuse** — is a major factor in healthcare acquired infection (HCAI) such as *Clostridium difficile*.

Survey Results – Antibiotic Prescribing in Primary Care in NI (see page 2 for details)

- This survey is a result of a collaboration between the Department of Finance Innovation Lab, DoH, PHA, and QUB to understand influences on antibiotic prescribing in primary care.
- Thanks to all the practice staff who took the time to compete.
- The next stage of the project is a systematic review of interventions tried in primary care to reduce inappropriate antibiotic prescriptions.
- In 2019, we will be incorporating our findings with our knowledge of behavioural science and your ideas of how we can support prescribers of antibiotics to develop and trial an intervention in a few innovative practices. If you want to know more or to get involved, please contact sarah.allen@nisra.gov.uk.

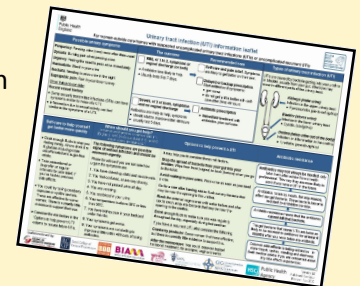
Antimicrobial Resources

TARGET resources have been endorsed by the PHA and HSCB for use in Northern Ireland to complement our existing [resources](#).

Practice have been sent copies of the following patient resources:

- Treating your infection - Respiratory tract Infection
- Treating your infection - Urinary Tract infection
- Managing your infection

Additional copies and resources are available to download and print from the [RCGP website](#).



HSCB MicroGuide - What's New?

- Sore Throats: Fever PAIN Clinical Score replaces Centor Criteria
- Sinusitis: Updated to follow [NICE guideline Sinusitis \(acute\): antimicrobial prescribing \[NG79\]](#)
- UTI section: sections revised to clearly differentiate on treatment based on age/gender
- UTI section: Nitrofurantoin vs trimethoprim. Both remain first line options; Prescriber to make final decision depending on the actual risk in the individual patient (see guideline for full information).



<http://kaywa.me/T1hzb>



<http://kaywa.me/7leWs>

Read Codes

Read codes may be helpful when auditing antibiotics:

- **8BP0** (Deferred antibiotic therapy)
- **80A9** (Provision of written info about antibiotic therapy)
- **8CAk** (Patient advised to delay filling of prescription).

Antimicrobial Workshops - Dates for your Diary

HSCB in collaboration with NICPLD are running workshops on the evidence-based management (and self-management) of common infections in primary care.

- **Tuesday 16th October – Portadown**
- **Wednesday 17th October – Antrim**
- **Thursday 25th October – Cookstown**
- **Wednesday 7th November & Tuesday 13th November – Belfast**

To Book Places:
Pharmacists - [NICPLD](#)
GPs - medicinesni.com

World Antibiotic Awareness Week

12–18th November 2018

Learn how to handle antibiotics with care and help us.



Survey Results are in!

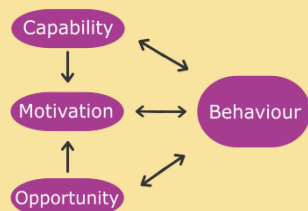
Antibiotic Prescribing in Primary Care in Northern Ireland

Question: What are the factors affecting antibiotic prescribing in primary care, particularly in the context of diagnostic uncertainty?

Method: An online survey was issued to all primary care practice managers and antibiotic champions and was forwarded onto prescribers (response rate 9%, n=137)

Results: We've highlighted some of the findings below.

Consider using the COM-B model of behaviour when thinking about behaviour change. Using a structured model is useful when working through a complex problem



Michie, S., van Stralen, M. M., West, R. (2011). The behaviour change wheel: A new method for characterising and designing behaviour change interventions. *Implementation Science*, 6(42).

If prescribers suspect a viral infection, they are most likely to prescribe antibiotics if the patient is elderly, in a nursing home, or has a long-term condition.



4 in 5 prescribers believe that delayed prescriptions are effective in reducing patient consumption of antibiotics.

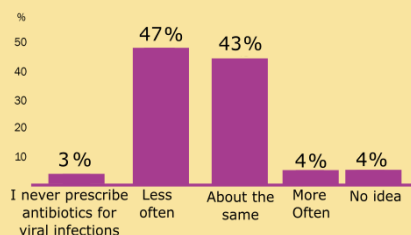


Prescribers take antimicrobial resistance (AMR) seriously.

97% agree that AMR is a challenge that needs addressed urgently

88% agree that they have some personal responsibility for addressing AMR in their practice

Most prescribers said they prescribe less often than their peers.



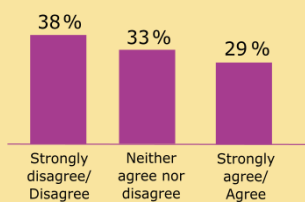
Compared to other prescribers in primary care, how frequently do you feel you would prescribe an antibiotic?

Prescribers value refresher training.

70% of prescribers thought it was 'Important' to get refresher training on distinguishing viral from bacterial infections

47% of prescribers 'Never' or 'Rarely' use the app to access the NI Management of Infection Guidelines.

Prescribers disagreed over whether it's safer to prescribe an antibiotic if you're not sure if the infection is bacterial or viral

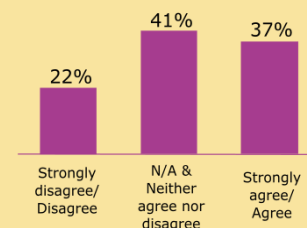


If I'm not sure if the infection is bacterial or viral, I believe it's safer to prescribe an antibiotic.

62% of prescribers reported feeling that patients expect antibiotics 'Often' and just under 70% of prescribers feel they are at least 'Sometimes' influenced by that perceived expectation.



Opinions were split over whether point-of-care (CRP) testing is a useful tool to justify a decision not to prescribe an antibiotic for a lower respiratory tract infection



Next steps: We will combine the survey findings with a systematic review and work with prescribers and patients to produce interventions to develop and trial.

Scan the QR code to see the full report or visit <http://goo.gl/ZLuPAu>



Questions? Comments? Get in touch:

sarah.allen@nisra.gov.uk
 declan.bradley@hscni.net
 @ilab_ni

