

World Congress and Exhibition on **Antibiotics**

September 14-16, 2015 Las Vegas, USA



Martin Duerden
Bangor University, UK

Antibiotic prescribing for respiratory tract infections in primary care

In the UK 60% of all antibiotic prescriptions are for upper respiratory tract infections (URTIs), although for 60 - 90% of these an antibiotic will not provide resolution or symptom relief. Inappropriate prescribing contributes to antibiotic resistance (AMR), a WHO-recognised urgent issue threatening global health. We conducted an online multinational study of URTI patients in 33 countries (~500 in each). In the UK 68% of healthcare practitioner encounters for URTI in the last year were with a GP; of these 24% resulted in antibiotic prescription. Comparable rates of GP prescribing were seen in several other countries; e.g. USA (24%), Mexico (23%), and South Africa (26%), underscoring the global dimension of inappropriate prescribing. In the UK concerns around AMR have been raised by the Prime Minister and the Chief Medical Officer with forthcoming reports on antibiotic stewardship and risk-related behaviours from The National Institute for Health and Care Excellence (NICE). The Global Respiratory Infection Partnership (GRIP), a group of international experts, was established in 2011 to promote rational antibiotic use and stewardship for URTIs. Practical steps at national and local levels are urgently needed to bring about change, especially in behaviours. GRIP have created useful resources for multiple stakeholders to identify high risk patients and promote symptomatic relief for others. Despite considerable efforts, these UK data show continuing inappropriate antibiotic prescribing for URTIs, especially in primary care. Further education of GPs and patients is required. This is recognised as paramount and, based on its '5P' framework, GRIP is committed to promoting non-antibiotic, symptomatic relief for self-limiting conditions.

Biography

Martin qualified in medicine from Newcastle University in 1982 and has worked as a GP since 1986. He obtained a Masters qualification in public health at Cambridge University in 1997. He has had a longstanding interest in applying evidence-based medicine to prescribing and therapeutics. He has previously worked for the National Prescribing Centre and the Department of Medicines Management at Keele University. From 1999 he has worked as a part-time GP in Conwy, North Wales, and initially worked as Medical Director for Conwy Local Health Board. Following the reorganisation of health services in Wales in 2009 he became Deputy then Acting Medical Director for the Health Board which manages all primary and secondary care NHS services in North Wales. He helped to organise and run the Diploma in Therapeutics at Cardiff University between 2005 and 2010. He chaired the New Medicines Group for Wales from inauguration in 2007 through to 2010. He is a Clinical Adviser on prescribing and evidence-based medicine for the Royal College of GPs, and is member of one of NICE's technology appraisal committees.

martin@theduerdens.co.uk

N	otes:	•