

Study on Antibiotic Resistance in Patients

Azita Haddadi*

Children's Heart Centre, British Columbia Children's Hospital and University of British Columbia, Vancouver, Canada

DESCRIPTION

Antibiotic prescribing remains a continuing problem for countries around the world, including the United States. One of the most successful methods is prescription delay Dose Area Product (DAP). DAP provides patients with a prescription and assessment of your patients problem. The purpose of this study is to increase awareness of antibiotic resistance in the community and identify the barriers faced by primary care physicians initiating DAP patients. The UN General Assembly has identified antimicrobial resistance as the most pressing global risk. Some bacterial strains, such as carbapenem-resistant *Klebsiella pneumoniae*, have few treatment options. Infection with this bacterium is associated with a mortality rate of 40% to 70%. In addition, some bacteria are not only difficult to treat, but are also thought to be incurable with established antibiotics.

Antimicrobial Resistance (AMR) statements are available for all approved and available antibiotics. Not only is resistance to known treatments increased, but fewer antibiotics are being developed. Bacteria quickly develop resistance and reduce their beneficial interest in developing new antibiotics. For example, between 1983 and 1987, 16 new antibiotics were introduced by the United States. However, only six new antibiotics were approved between 2010 and 2016. Health care providers usually choose between two different methods. Provide the patient with a prescription and referral and fill it out later, or leave the prescription at the clinic and the patient to receive the symptoms. In any case, patients are fully committed to decisions that affect their health. Therefore, this may be the first choice for physicians and general practitioners as it reduces dependence on antibiotics while maintaining patient satisfaction. This meant

providing up-to-date evidence of the effectiveness of existing interventions in reducing antibiotic prescribing. Therefore, this comprehensive analysis was a multi-step process.

Antibiotics are medicines used to avoid and treatment of bacterial infections. Antibiotic resistance occurs when the bacteria change with the use of these drugs. These bacteria can infect humans and animals, and the infections they cause are more difficult to treat than those caused by non-resistant bacteria. Antibiotic resistance leads to increased medical costs and increased mortality. Antibiotic resistance is a growing concern which is a risk factor for the global health. New resistance mechanisms have emerged and are spreading around the world and to treat common infectious diseases. The list of infections such as pneumonia, tuberculosis, sepsis, gonorrhoea, and food poisoning becomes increasingly difficult and can become incurable as antibiotics become less effective.

Antibiotic resistance is accelerated by the misuse and abuse of antibiotics, and inadequate infection prevention and control as well. Measures can be taken at all levels of society to reduce the impact and limit the spread of resistance. Antibiotics should only be used if they are prescribed by a certified physician. Following the advice of your health care professional while using antibiotics, would be beneficial. Utmost care should be taken while administering antibiotics and one should not share or use any remaining antibiotics. Otherwise antibiotic resistance affects our ability to prevent and treat these diseases, increasing recovery time, the length of time people stay in hospital and death rates. Antibiotics save lives when administered properly by taking appropriate care but it might also have a bad impact.

Correspondence to: Dr. Azita Haddadi, Children's Heart Centre, British Columbia Children's Hospital and University of British Columbia, Vancouver, Canada, Tel:+1-604-875-3462; E-mail: blairemaile@gmail.com

Received: 2-May-2022, Manuscript No. EOED-22-18053; **Editor assigned:** 06-May-2022, Pre QC No. EOED-22-18053 (PQ); **Reviewed:** 20-May-2022, QC No. EOED-22-18053; **Revised:** 27-May-2022, Manuscript No. EOED-22-18053 (R); **Published:** 08-Jun-2022. DOI: 10.35248/2329-6631.22.11.174.

Citation: Haddadi A (2022) Study on Antibiotic Resistance in Patients. J Develop Drugs. 11:174.

Copyright: © 2022 Haddadi A. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.
