Interventions to improve appropriate antibiotic prescribing for uncomplicated acute respiratory tract infections
McDonagh M, Peterson K, Winthrop K, Cantor A, Holzhammer B, Buckley D

Record Status
This is a bibliographic record of a published health technology assessment from a member of INAHTA. No evaluation of the quality of this assessment has been made for the HTA database.

Citation

Authors' objectives
To assess the comparative effectiveness of interventions for improving antibiotic use for acute respiratory tract infections (RTIs) in adults and children.

Authors' conclusions
The best evidence supports the use of specific education interventions for patients/parents and clinicians, procalcitonin in adults, and electronic decision support to reduce overall antibiotic prescribing (and in some cases improve appropriate prescribing) without causing adverse consequences, although the reduction in prescribing varied widely. Other interventions also reduced prescribing but evidence on adverse consequences was lacking, insufficient, or mixed. Future studies should use a complex intervention framework and better evaluate measures of appropriate prescribing, adverse consequences such as hospitalization, sustainability, and resource use and the impact of potential effect modifiers.

Final publication URL

Indexing Status
Subject indexing assigned by CRD

MeSH
Humans; Anti-Bacterial Agents; Respiratory Tract Infections; Clinical Trial; Prescriptions

Language Published
English

Country of organisation
United States

English summary
An English language summary is available.

Address for correspondence
AHRQ, Center for Outcomes and Evidence Technology Assessment Program, 540 Gaither Road, Rockville, MD 20850, USA Email: AHRQTAP@ahrq.hhs.gov

AccessionNumber
32015000999
Date abstract record published
22/09/2015