

FAO: Primary Care colleagues in North Yorkshire and York

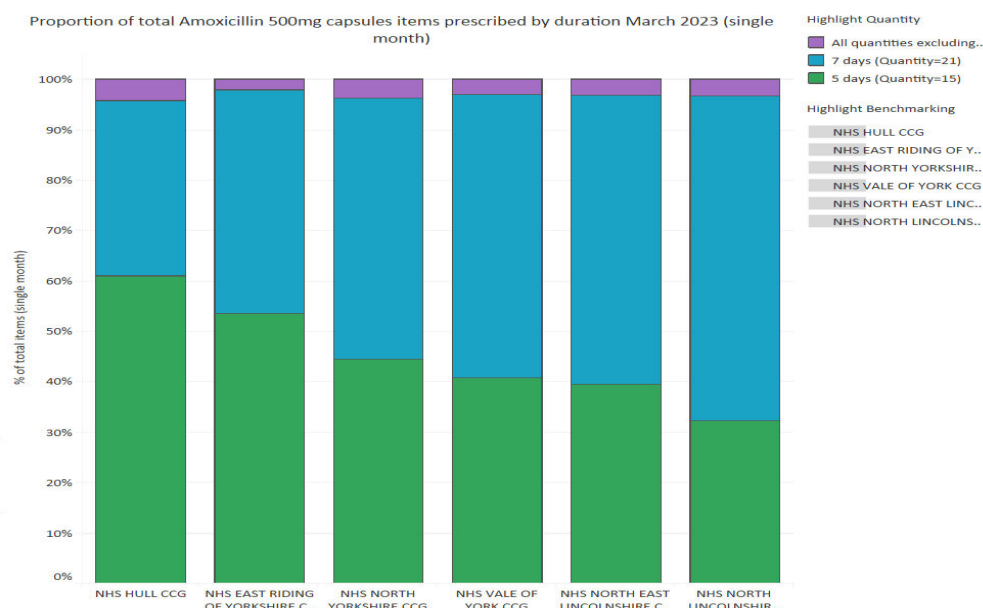
Medicines Management Prescribing Focus – June 2023

Antimicrobial Stewardship: Five Day Courses of Antibiotics for Lower Respiratory Tract Infections (LRTIs)

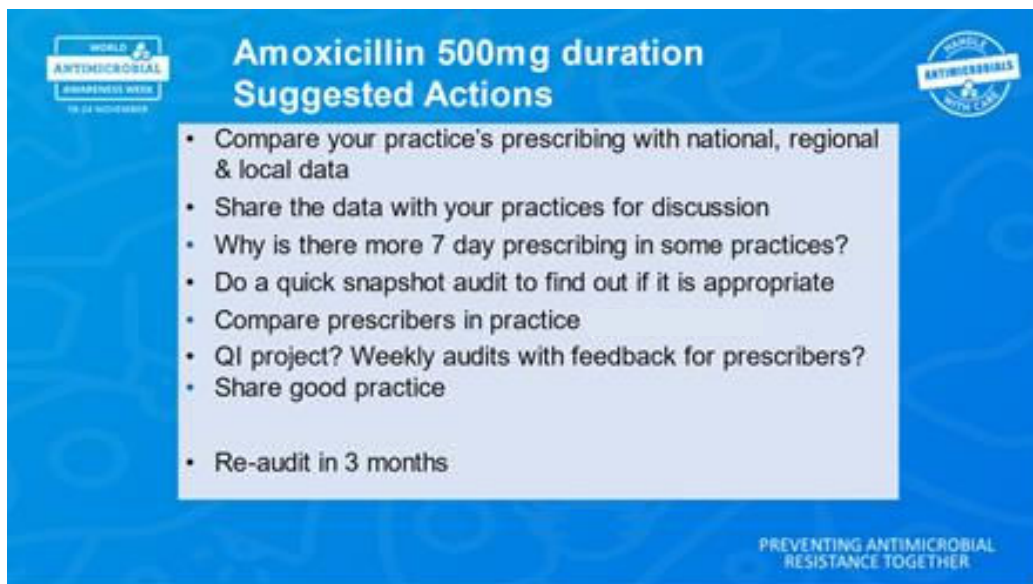
Summary:

- Current [NICE/PHE](#) guidelines (now hosted on the TARGET website) for treatment of LRTIs advise that, where antibiotics are considered necessary, course lengths of 5 days are prescribed for all indications listed (except bronchiectasis)
- A clear causal link exists between antibiotic exposure and antibiotic resistance
- Rates of treatment duration longer than advised in national guidelines in one [study](#) were highest for respiratory tract infections and were similar among patients with and without comorbidities
- In another [study](#) longer antibiotic courses were found to be no more effective than shorter courses at preventing infection-related hospitalisations
- Substantial reductions in antibiotic use in primary care could be achieved by reducing course lengths to 5 days for LRTIs (except bronchiectasis)

In the different localities of our ICB the quantity of amoxicillin 500mg capsules (commonly first line for LRTIs in non-penicillin allergic patients) prescribed as a 5 day course can be seen as the green portion of the stacked bar chart below (source: PrescQIPP Optimising antimicrobial use dashboard). This varied from 61% in Hull to 32% in North Lincolnshire. NY= 44% and York = 41%. This data is from March 2023, for all age groups. Although amoxicillin can be prescribed for different indications which may require different course lengths, this is a useful marker for discussion.



Suggested actions :



Useful resources:

- [NICE/PHE Summary of antimicrobial prescribing guidance – managing common infections](#)
- [PrescQIPP Optimising Antimicrobial Use Dashboard \(requires log in\)](#)

Lowering AntiMicrobial Prescribing (LAMP) Initiative:

The third LAMP report was issued to all practices earlier this month. These antibiotic prescribing feedback reports benchmark your antibiotic prescribing rate versus other practices in the PCN/place/whole ICB, highlighting your practice's performance on some key indicators. Template action plans are included to assist each practice team to review their own data and work on any potential areas of improvement identified.

Please inform the MMT via our generic e-mail address (below) if the reports are not going to the correct team member in your practice.

Treatment of *Clostridioides difficile* infection (C. difficile or CDI):

Of note is that oral metronidazole is no longer indicated for the treatment of C. difficile infections. Metronidazole has lower initial cure rates and higher recurrence rates than vancomycin. We would always advise seeking prompt specialist advice from a microbiologist or infectious diseases specialist before starting treatment.

<https://www.nice.org.uk/guidance/ng199/resources/visual-summary-pdf-9194639149>

Please share the information in this document with all relevant members of staff in the Practice.

For any queries or feedback on this topic please contact us via: hnyicb-ny.rxline@nhs.net

The MMT welcomes ideas and suggestions that you and colleagues may wish to recommend for future prescribing focus editions.

Many thanks,

North Yorkshire & York Medicines Management Team