

M.D.s still using non-recommended antibiotics to treat sore throat

It's bad enough that medical doctors continue to prescribe antibiotics when they aren't necessary, but a new research study shows that they usually prescribe non-recommended antibiotics which are more expensive and can contribute to the problem of antibiotic resistance.

Primary care physicians are prescribing antibiotics for more than 50% of the adults with sore throat, often prescribing antibiotics that are not recommended for treating sore throat, according to an article in a recent issue of the *Journal of the American Medical Association (JAMA)*.

Jeffrey A. Linder, M.D., of Massachusetts General Hospital, and Randall S. Stafford, M.D., Ph.D., of Stanford Center for Research in Disease Prevention, analyzed 2,244 visits to primary care physicians in the National Ambulatory Medical Care Survey (1989-99) by adults whose chief complaint was sore throat.

The authors estimated that there were an average of 6.7 million annual visits to office-based, community physicians over the study period by adults with sore throat. Antibiotics were used in 73% of visits.

Patients who were treated with antibiotics were given antibiotics not recommended for sore throat in 68% of visits. Although there was an overall decrease in the use of antibiotics over the study period, the percentage of non-recommended antibiotics prescribed increased.

According to the article, sore throat is the second most common symptom for which people seek medical care. In most cases, the sore throat is from a virus and does not require antibiotic treatment. In the few cases which may be helped by antibiotics, many doctors don't prescribe the ones recommended.

The authors stated that their study raises two main concerns:

*** cost of the non-recommended antibiotics, which can be as much as 20 times that of recommended antibiotics; and

*** risk of developing bacterial resistance, which renders antibiotics less effective in combating bacterial infections.

"... the use of expensive, broad-spectrum antibiotics that can induce resistance is still frequent," the authors said. "Efforts should be continued to encourage appropriate antibiotic use by both patients and physicians."

SOURCE: *Journal of the American Medical Association (JAMA)*, September 12, 2001.