



[GP_Name]
[Address 1]
[Address 2], [Address 3]
[Address 4], [Address 5]

March 2018

Antibiotic prescribing rates in your practice have increased

Dear Dr [GP_Surname]

Antibiotic usage in your practice

As you know antimicrobial resistance is a serious and growing threat to our health and economy. Reducing inappropriate antibiotic prescribing in primary care is a key component to the response in preventing a public health catastrophe.

The great majority (80%) of practices in England reduced or stabilised their antibiotic prescribing rates in 2016/17. However, your practice is in the minority that have increased their prescribing by more than 4%. *

I understand that this is not a simple issue and you may have already taken steps to reduce antibiotic prescriptions while safeguarding patient health. I encourage you to join prescribers who have actually reduced their rate of prescribing by taking three simple actions, described on the right.

I know that general practitioners are doing a demanding job in difficult circumstances and dealing with patient pressures, but if we all make these small changes we can have a big effect on everyone's health and safeguard antibiotics for future generations.

Your local CCG prescribing advisor can also help your practice reduce inappropriate antibiotic prescribing and links to further information is provided below.

Thank you for working with me on this.

Kind regards

PROFESSOR DAME SALLY DAVIES
Chief Medical Officer

1. ADVISE

Discuss patient self-care instead

Use the enclosed leaflet or search online for the "TARGET antibiotics toolkit".

2. DELAY

Offer a delayed prescription instead

This results in fewer patients using antibiotics and is associated with similar symptomatic outcomes to immediate prescription (Little, P. et al., BMJ. 2014; 348).

3. TALK

Speak to other prescribers in your practice to ensure they are changing their antibiotic prescribing too

* Your practice's prescribing data are available online. Data analysed by Public Health England. Data on prescribing rates account for patient demographics. Comparisons between practices exclude outliers. Comparing Oct 2015 - Sept 2016 to Oct 2016 - Sept 2017.

Patient Name It is recommended that you self-care

Your infection	Without antibiotics, most are better by	How to look after yourself and your family	When to get help
<input type="checkbox"/> Middle-ear infection	8 days	<ul style="list-style-type: none"> Have plenty of rest. Drink enough fluids to avoid feeling thirsty. Ask your local pharmacist to recommend medicines to help your symptoms or pain (or both). Fever is a sign the body is fighting the infection and usually gets better by itself in most cases. You can use paracetamol if you or your child are uncomfortable as a result of a fever. Use a tissue and wash your hands well to help prevent spread of your infection to your family, friends and others you meet. Other things you can do suggested by GP or nurse: 	<p>The following are possible signs of serious illness and should be assessed urgently:</p> <ol style="list-style-type: none"> If your skin is very cold or has a strange colour, or you develop an unusual rash. If you feel confused or have slurred speech or are very drowsy. If you have difficulty breathing. Signs that suggest breathing problems can include: <ul style="list-style-type: none"> breathing quickly turning blue around the lips and the skin below the mouth skin between or above the ribs getting sucked or pulled in with every breath. If you develop a severe headache and are sick. If you develop chest pain. If you have difficulty swallowing or are drooling. If you cough up blood. If you are feeling a lot worse. <p>If you or your child has any of these symptoms, are getting worse or are sicker than you would expect (even if your/their temperature falls), trust your instincts and seek medical advice urgently from NHS 111 or your GP. If a child under the age of 5 has any of symptoms 1-3 go to A&E immediately or call 999.</p> <p>Less serious signs that can usually wait until the next available appointment:</p> <ol style="list-style-type: none"> If you are not starting to improve a little by the time given in the 'Most are better by' column. In children with middle-ear infection: if fluid is coming out of their ears or if they have new deafness. Mild side effects such as diarrhoea, however seek medical attention if you are concerned. Other
<input type="checkbox"/> Sore throat	7 - 8 days		
<input type="checkbox"/> Sinusitis	14 – 21 days		
<input type="checkbox"/> Common cold	14 days		
<input type="checkbox"/> Cough or bronchitis	21 days		
<input type="checkbox"/> Other infection: days		

Back-up antibiotic prescription to be collected after days only if you are not starting to feel a little better or you feel worse.

Collect from: Pharmacy General practice reception GP, nurse, other

- Colds, most coughs, sinusitis, ear infections, sore throats, and other infections often get better without antibiotics, as your body can usually fight these infections on its own.
- Taking antibiotics encourages bacteria that live inside you to become resistant. That means that antibiotics may not work when you really need them.
- Antibiotics can cause side effects such as rashes, thrush, stomach pains, diarrhoea, reactions to sunlight, other symptoms, or being sick if you drink alcohol with metronidazole.
- Find out more about how you can make better use of antibiotics and help keep this vital treatment effective by visiting www.nhs.co.uk/keepantibioticsworking

Never share antibiotics and always return any unused antibiotics to a pharmacy for safe disposal. Leaflet developed in collaboration with professional medical bodies.