

Encouraging good antimicrobial prescribing practice: A review of antibiotic prescribing policies used in the South East Region of England

ABSTRACT

There was considerable variation in content and quality across policies, a clear lack of an evidence base and a need to revise policies in line with current recommendations.

INTRODUCTION

Background In the United Kingdom, concerns around resistance to antibiotics have been expressed for some time, leading to a House of Lords select committee report, a report from the Standing Medical Advisory Committee (SMAC) and a subsequent Health Service Circular setting out a course of action for the National Health Service. The Health Service Circular (HSC) was based on four elements of strategy, surveillance, prudent antibiotic use, and infection control. These concerns focussed on the need to treat patients on the one hand but not to so compromise the environment that there is no effective treatment for certain infections. In the HSC, Regional Directors of Public Health were tasked to lead the work addressing the problem of antimicrobial resistance with colleagues who were the Regional Epidemiologists and the Regional Prescribing Leads. Regional Prescribing Leads were asked 'to identify good prescribing practice in the use of antimicrobials' and to ensure that information in widely disseminated among those who are involved in prescribing antimicrobials. This project was undertaken to review one of the long-standing measures for encouraging good practice and controlling antibiotic use: the antibiotic policy, i.e. guidance or instruction on when and how antimicrobial drugs are to be used. The primary aim was to gain insight into the use of antibiotic policies as a mechanism to encourage good, evidence-based, practice and facilitate the appropriate use of antimicrobials. The advice provided in the policies was assessed against recognised best practice.

CONCLUSION

Conclusions There is clearly a wide variation across the structure and content of antibiotic policies in the SouthEast. It is hoped that this review will lead to a revision of policies to bring them into line with current recommendations. The overall aim is to ensure that an effective range of antibiotics is maintained. Policies alone will not achieve this, and there needs to be local ownership by all prescribers with effective monitoring to ensure that compliance with the local antibiotic policy can be demonstrated. Perhaps the most pressing need is the development of an evidence base to underpin not only the content of policies but also their implementation and use. This needs to be carried out by a suitable group nationally in order that all may benefit.