



Antibiotics for Respiratory Infections A Note to Our Patients

First, we would like to thank you, our patient, for your confidence in us over the years. We strive to give you the most up to date professional care for your allergies and occasionally respiratory infections. However, recent literature has forced us to look at how we handle antibiotics for respiratory infections. We will first show some brief literature research and then tell you how we plan to handle requests for antibiotics for respiratory infections in the future.

Recent research has shown that yellow/green drainage does not always mean a bacterial infection. A study was done where volunteers were given the rhinovirus (the common cold virus). On days 3-5 after the viral symptoms started, the patients had yellow/green drainage. This disproved a longstanding notion that all yellow/green drainage coming from the nose or the chest has to be a bacterial infection.

Recent national guidelines have made recommendations on when antibiotics may be needed for sinus infections. They feel that the need for an antibiotic for a sinus infection was increased if the sinusitis symptoms were **worse after 5 days** or the symptoms **persisted after 10 days**. They did recognize that there are patients who have immunodeficiencies, who have had sinus operations, who have no spleen, and those who have other medical conditions that may warrant antibiotics sooner. These rules may vary on an individual case. Some studies are suggesting that recovering from a respiratory infection is more complete if a patient can manage thru the infection without an antibiotic.

Lastly, we assume that everyone has read/heard/seen in the newspapers, magazines, radio, television, etc., that the bacteria associated with sinusitis, bronchitis, pneumonia, ear infections, etc., have become **more resistant to our antibiotics**. The blame for this is being put on the shoulders of physicians who prescribe antibiotics too quickly and too easily for respiratory infections that are in all likelihood viral.

In summary, recent literature and experiences with antibiotics have shown that the possible need for antibiotics for sinobronchial infections usually does not start until 5 days after the onset. If symptoms persist beyond 10 days, then an antibiotic may be needed. Just because yellow/green drainage occurs on days 1-5 of an infection does not necessarily mean an antibiotic is needed. We need to decrease the use of antibiotics when they are not necessary. Studies show that resistance to an antibiotic can be improved with decreased use of that antibiotic.

Many of you may have had antibiotics in the past for conditions that in retrospect may have been viral. We are now asking you to please understand as we try to stick to the guidelines above. **Namely, antibiotics for sinusitis will be considered only if 5 days have gone by and the symptoms are worse OR 10 days have gone by and the symptoms persist.** Yellow/green drainage is not always a sign that antibiotics are needed. **Secondly, we will be reducing the number of antibiotics given over the phone, especially after hours.** We feel it is becoming increasingly important that patients be seen before antibiotics are given in the vast majority of cases. **Lastly, we understand that there will be VERY FEW patients who won't fit these guidelines and whose need for antibiotics will be considered on a case by case basis.**

Help us to decrease the resistance to bacteria in our community. Please read this carefully and the next time you have a cold, consider whether or not you need an antibiotic. Please read the criteria we have mentioned above. We ask that you **first contact your family doctor regarding the need for antibiotics.** We will be instituting these guidelines and ask for your understanding regarding whether or not we decide to give antibiotics. Expect to be asked to be seen by one of our doctors or nurse practitioners if the triage nurse feels it is necessary. **Do not expect the on call doctor to give an antibiotic after hours.** Common respiratory infections are not significantly improved by antibiotics given the night before when the doctor or nurse practitioner can see you and prescribe an antibiotic the next day.

Again, thank you for your trust in us to do what is best for your illness.