6 steps to take when a patient insists on that antibiotic

In this issue of JFP, Wiskirchen and colleagues discuss the appropriate use of antibiotics in outpatient settings, providing stewardship advice for several conditions we frequently see in primary care practice.

One of the symptoms for which we most frequently battle requests for antibiotics is acute cough. Despite the fact that more than 90% of cases of acute cough illness (aka acute bronchitis) are caused by viruses, the prescribing rate for it in the United States remains about 70%.

Over the years, I’ve honed a “spiel” that I use with patients with acute cough illness to help keep my antibiotic prescribing to a minimum. It must be working; my prescribing rate is less than 20%. What follows are some of my catch phrases and techniques.

1. **Acknowledge the patient’s misery.**
   “Sounds like you have a really bad bug."

2. **Tell the patient what he or she doesn’t have.**
   “Your lungs sound good, and your throat does not look too bad, so that means you don’t have strep throat or pneumonia. That’s good news.”

3. **Explain what viruses are “making the rounds.”**
   If you have surveillance data, that’s even better. “I have seen several other patients with symptoms just like yours this week.”

4. **Set realistic expectations.**
   Tell patients how long their cough is likely to last. The duration of the typical cough is (unfortunately) about 17 days. Most patients (and even some doctors) think a bad cold should be gone in 7 days.

5. **Choose your terms carefully.**
   Don’t use the term “acute bronchitis.” It sounds bad and worthy of an antibiotic. “Chest cold” sounds much more benign; patients are less likely to think they need an antibiotic for a chest cold.

6. **When all else fails, consider a delayed prescription.**
   I reserve this strategy for patients who are insistent on getting an antibiotic even though their illness is clearly viral. Randomized trials of the delayed strategy show that fewer than 50% of patients actually fill the prescription.

Develop your own spiel to reduce unnecessary antibiotic prescribing. You’ll find that it works a good deal of the time.


