

# We LOVE Antibiotics!

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Antibiotics are often inappropriately prescribed, particularly in the setting of viral infections. *Why are we so in LOVE with antibiotics? What drives us to take or prescribe antibiotics when not necessary?*

## 1) Assumption: Parents/patients expect an antibiotic

- From interviews of 109 parents of children w/ respiratory infections, none planned to request antibiotics
- Parents were looking for reassurance that nothing was seriously wrong & desired a plan to reduce symptoms



For resources for speaking with patients/families about antibiotics  
[Click here](#)

## 2) Assumption: Certain symptoms always = bacterial infections and antibiotics

- A runny nose with green/yellow mucous or sore throat doesn't automatically mean a bacterial infection
- Viruses can cause similar symptoms and do not require antibiotics
- Use this chart to determine when antibiotics may be needed



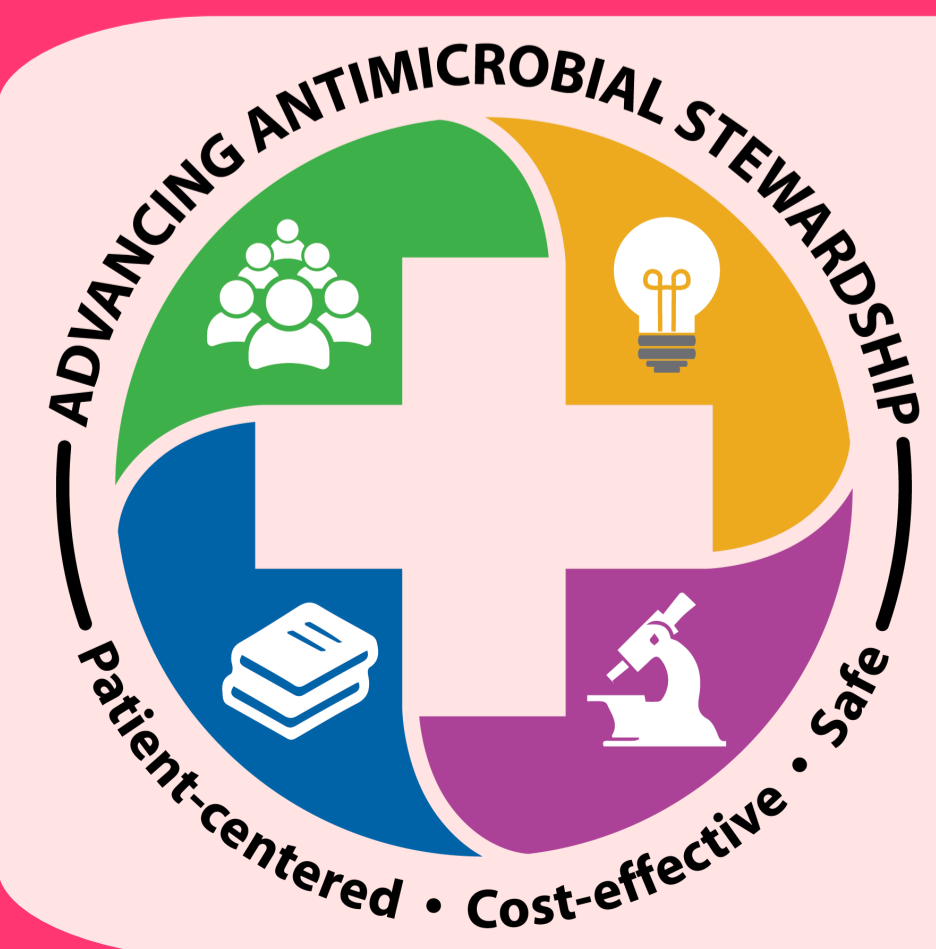
## 3) Assumption: Positive cultures always = infection

- In certain situations, this may represent colonization or contamination
- This is commonly seen with urine cultures, tracheal aspirates, and some blood cultures
- Consider the patient's presentation and symptoms before treating. Avoid overtesting and overtreatment

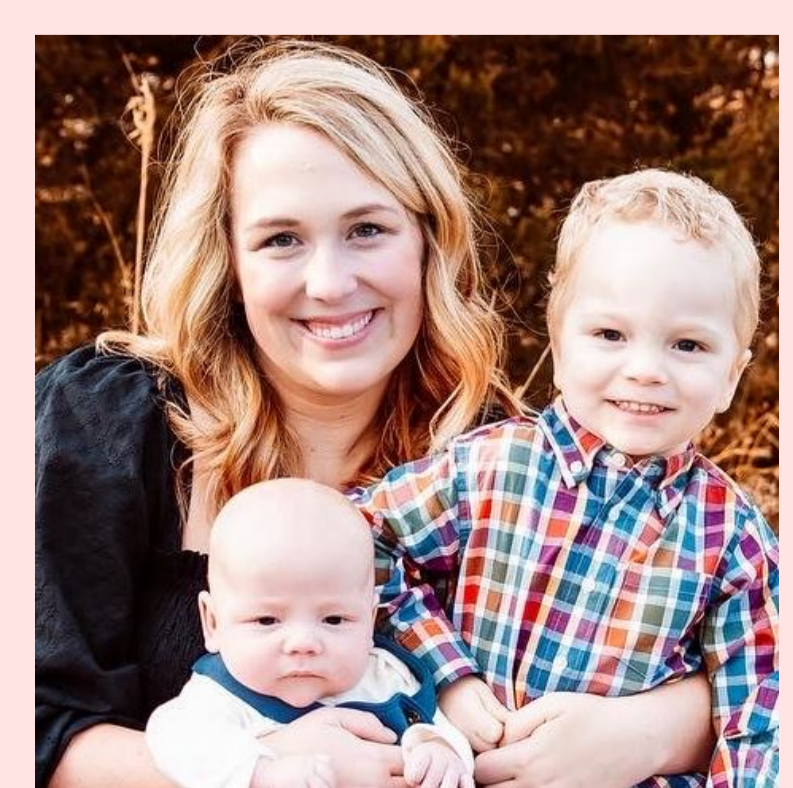


## 4) Assumption: Antibiotics aren't harmful

- In children who go to the emergency department for adverse drug reactions, antibiotics are the most common reason for the visit
- In a recent study, 1/3 of children received inappropriate antibiotics, which increased the risk of adverse events (C. diff infections, allergic reactions, etc) and costs
- Consider the risks vs. benefits when utilizing antibiotics as harms do exist



Click [Here](#) or use the QR code to Take a Short Quiz!



Dr. Annie Wirtz is the pharmacist director of the Antimicrobial Stewardship Program at Children's Mercy. She enjoys spending time with her boys, Charlie and Ollie, outside of work!