

DID YOU KNOW?

The immune system is able to cope with respiratory infections in otherwise healthy people

ANTIBIOTICS ONLY KILL BACTERIA

MOST UPPER RESPIRATORY TRACT INFECTIONS (URTIS) ARE CAUSED BY VIRUSES¹⁻⁶

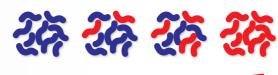
DID YOU KNOW?

Most people with a cold, sore throat, earache, or cough don't need antibiotics to recover

DID YOU KNOW?

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Antibiotics won't make you feel better sooner. If we use antibiotics appropriately we can prevent antibiotic resistance - YOU CAN MAKE A DIFFERENCE



ANTIBIOTIC RESISTANC

WHEN YOU TAKE ANTIBIOTICS. BACTERIA IN YOUR BODY CAN BECOME RESISTANT TO THE ANTIBIOTIC9,10



RESISTANT BACTERIA CAN REMAIN IN YOUR BODY FOR UP TO **1 YEAR AND SPREAD** TO OTHER PEOPLE^{11,12}

HOW LONG WILL YOUR SYMPTOMS LAST?^{7,13-20}



1. Ebell MH, et al. JAMA 2000;284:2912-8; 2. Van Gageldonk-Lafeber AB, et al. Clin Infect Dis 2005;41:490-7; 3. Kenealy T, Arroll B. Cochrane Database Syst Rev 2013;6:CD000247; 4. Scott JG, et al. J Fam Pract 2001;50:853-8; 5. Baron S. Medical Microbiology 4th edition. Chapter 93. Infections of the respiratory system. 1996. University of Texas Medical Branch at Galveston, Galveston, Texas; 6. Creer DD, et al. Thorax 2006;61:75-9; 7. National Institute for Health and Care Excellence. Sore throat (acute): antimicrobial prescribing. Clinical guideline 84. January 2018. Available at: https://www.nice.org.uk/guidance/ng84 (accessed September 2023); 8. Wright J. Paauw DS. Med Clin North Am 2013;97:667-79; 9. World Health Organization. Global action plan on antimicrobial resistance, 2015. Available at: https://www.who.int/publications/i/ item/9789241509763 (accessed September 2023); 10. Zaman SB, et al. Cureus 2017;9:e1403; 11. World Health Organization. Antimicrobial resistance. Fact sheet, 2018. Available at: https://www.who.int/ iews-room/fact-sheets/detail/antimicrobial-resistance (accessed September 2023); 12. Costelloe C, et al. BMJ 2010;340:c2096; 13. Spinks A, et al. Cochrane Database Syst Rev 2013;11:CD000023; 14. Macy E 1 2012;16:61-6; 15. Centers for Disease Control and Prevention. Flu symptoms and complications. 2018. Available at: https://www.cdc.gov/flu/symptoms/symptoms.htm (accessed September 2023); 16. Gwaltney JM, et al. JAMA 1967;202:494-500; 17. Arruda E, et al. J Clin Microbiol 1997;35:2864-8; 18. National Institute for Health and Care Excellence. Otitis media (acute): antimicrobial prescribing. Clinical guideline 91. March 2018. Available at: https://www.nice.org.uk/guidance/ng91 (accessed September 2023); 19. National Institute for Health and Care Excellence. Sinusitis (acute): antimicrobial prescribing. Clinical guideline 79. October 2017. Available at: https://www.nice.org.uk/guidance/ng79 (accessed September 2023); 20. National Institute for Health and Care Excellence. Cough (acute): antimicrobial prescribing. Clinical guideline 79. October 2017. Available at: https://www.nice.org.uk/guidance/ng120 (accessed September 2023); 20. National Institute for Health and Care Excellence. Cough (acute): antimicrobial prescribing.

WHAT KIND OF ADVICE WOULD YOU LIKE?

✓ Pain relief ✓ Reassurance ✓ Information on duration

DIFFERENT PRODUCTS ARE AVAILABLE FOR SYMPTOM RELIEF - WHAT KIND OF PRODUCT **DO YOU PREFER?**





Tablets

Soluble medicine





Lozenges



ANTIBIOTICS ARE NOT PAIN RELIEVERS



ANTIBIOTICS CAN CAUSE SIDE EFFECTS^{7,8} SUCH AS DIARRHOEA THRUSH OR A RASH



INFECTIONS CAUSED BY ANTIBIOTIC-RESISTANT BACTERIA ARE HARDER TO TREAT¹⁰



"If symptoms last longer than we discussed, do not improve or you develop new symptoms. come back and see me"









MYTH

Patients consulting for URTIs always want an antibiotic^{1,2}

ADDRESS PATIENT'S CONCERNS

- Ask the patient about the main symptom(s) they are affected by and explore their concerns
- Recognise that URTIs can be worrying and uncomfortable for patients

Hello, how can I help you today?" "It sounds like that is painful/ uncomfortable for you" 'How do you think I can help/what would you like me to do for you?' Let's look at what symptoms are affecting you most and how I can help



BE VIGILANT - ASSESS SEVERITY

In very rare cases, a URTI can be serious or the symptoms of a URTI can be early signs of another severe infection. If such signs should occur in the course of the disease, it may warrant further investigation or antibiotic treatment

SERIOUS VIRAL INFECTION? THESE VIRAL INFECTIONS MAY PRESENT WITH THE FOLLOWING SYMPTOMS:

Infectious mononucleosis³

- Eever
- Lymphadenopathy
- Severe sore throat
- General symptoms (fatigue, myalgia, chills, sweats, anorexia, retro-orbital headache)
- Non-specific rash
- Splenomegaly
- Hepatomegaly

Respiratory syncytial virus infection⁴

- Rhinitis
- Cough
- Fever
- Ear infections and croup may also occur in children COVID-19⁵
- Fever
- A new, continuous cough
- Loss or change to sense of smell or taste

Patients with these symptoms may require further attention including:³⁻⁸

- Onward referral to a doctor or hospital
- Antiviral therapy where appropriate
- Antibiotics should be avoided as they are ineffective against viruses
- Amoxicillin may cause a hypersensitivity reaction in patients with infectious mononucleosis
- Vaccination may be considered in high-risk groups

POTENTIAL RISK FACTORS

BE ALERT TO THOSE PATIENTS AT INCREASED RISK OF COMPLICATIONS:^{9,10}

- Elderly and frail patients or young children
- Immunocompromised or on certain drugs eg. corticosteroids, chemotherapy, carbimazole or disease-modifying drugs for arthritis
- Patients with pre-existing conditions such as diabetes, cystic fibrosis, chronic lung disease, HIV

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1. van Driel ML, et al. Ann Fam Med 2006:4:494-9: 2. van der Velden AW, et al. Pragmat Obs Res 2020:11:91-102: 3. National Institute for Health and Care Excellence. Glandular fever (infectious mononucleosis). Available at: https://cks.nice.org.uk/ topics/glandular-fever-infectious-mononucleosis/ (accessed September 2023); 4. GOV.UK. Respiratory syncytial virus (RSV): symptoms, transmission, prevention, treatment. Available at: https://www.gov.uk/government/publications/respiratory syncytial-virus-rsv-symptoms-transmission-prevention-treatment (accessed September 2023); 5. NHS UK. Coronavirus (COVID-19). Available at: https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/ (accessed September 2023); 6. National Institute for Health and Care Excellence. Influenza - seasonal. Available at: https://cks.nice.org.uk/topics/influenza-seasonal/ (accessed September 2023); 7. Hildreth C, et al. JAMA 2009;302:816; 8. Chovel-Sella A, et al. Pediatrics 2013;131:e1424-7; 9. Self Care Forum. Sore throat. 2020. Available at: https://www.selfcareforum.org/wp-content/uploads/2022/10/10-sore-throat-2022.pdf (accessed September 2023); 10. Centers for Disease Control and Prevention. People at nigh-risk of developing flu-like complications. Available at: https://www.cdc.gov/h1n1flu/highrisk.htm (accessed September 2023); 11. National Health Service. Sepsis symptoms. Available at: https://www.nhs.uk/conditions/sepsis (accessed September 2023); 12. Centers for Disease Control and Prevention. Sepsis recognition and treatment. Available at: https://www.cdc.gov/media/releases/2017/p0831-sepsis-recognition-treatment.html (accessed September 2023); 13. Sepsis Alliance. Sepsis basics. Available at: https://www.sepsis.org/sepsis-basics/symptoms (accessed September 2023); 14. Van Duijn HJ, et al. Br J Gen Pract 2007;57:561-8; 15. MSD Manual. Sore throat. Available at: https://www.sepsis.org/sepsis-basics/symptoms (accessed September 2023); 14. Van Duijn HJ, et al. Br J Gen Pract 2007;57:561-8; 15. MSD Manual. Sore throat. Available at: https://www.msdmanuals.com/en-gb/ professional/ear,-nose,-and-throat-disorders/approach-to-the-patient-with-nasal-and-pharyngeal-symptoms/sore-throat (accessed September 2023); 16. Centor RM, Samlowski R. Am Fam Physician 2011;83:26–8; 17. Medscape. Which physical ndings are characteristic of peritonsillar abscess. 2020. Available at: https://www.medscape.com/answers/194863-108461/which-physical-findings-are-characteristic-ofperitonsillar-abscess-pta (accessed September 2023); 18. Patient. Sore throat 2016. Available at: https://patient.info/doctor/sore-throat-pro (accessed September 2023).

APPROACH when talking to patients about URTI

Use the

1,2,3

GRIP

GLOBAL RESPIRATORY

INFECTION PARTNERSHIP



COUNSEL ON EFFECTIVE SELF-MANAGEMENT

FACT

Most patients seek information on the cause, prognosis and duration of symptoms, and pain relief^{1,2}

- Reassure the patient of the non-serious nature of most URTIs and the likely duration of symptoms
- Explain why antibiotics are not necessary use the information overleaf
- Recommend symptomatic relief, allowing for personal preferences
- Advise the patient to seek further medical advice if symptoms last longer than expected, do not improve, or if they develop new symptoms



"I'd say your immune system healthy enough to tackle it. In the meantime, a cough suppressant should give you some relie

'Let's start with some pain elief for your sinuses, and you ould try a corticosteroid nasal spray to relieve your symptoms



relievers for children to mak him more comfortable





Influenza⁶

- Sudden onset of:
- Nasal discharge
- Cough
- Fever
- Gastrointestinal symptoms Fatigue
- Generalised pain (headache, myalgia and arthralgia)
- Ocular symptoms (photophobia, conjunctivitis and pain upon eye movement)

SERIOUS BACTERIAL **INFECTION?**

ANY OF THESE RED FLAG SYMPTOMS REQUIRE **FURTHER INVESTIGATION:11-18**

- Feeling of severe general sickness
- Confusion and/or an altered mental state
- Pronounced or unusual sleepiness in children
- Shortness of breath and respiratory distress
- Reduction in urine
- Prolonged fever sweats and chills
- Drooling, muffled voice or severe swelling at the back of the throat



ASK QUESTIONS TO UNDERSTAND THE ROOT OF THE PROBLEM

- Ask the patient questions and carefully listen to their responses to understand the root of the problem and establish trust
- Asking questions will help to identify patients' needs and any misconceptions related to antibiotic strength and understand how much knowledge the patient has in relation to antimicrobial resistance

'Antibiotics are strong

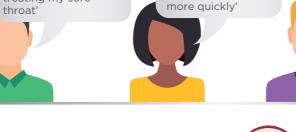
medications that are

more effective at

treating my sore

The ACE MODEL FOR ENGAGEMENT

aims to address patient misconceptions about antibiotics and antimicrobial resistance and should be used alongside the 1.2.3-STEP APPROACH



'Antibiotics will help

me to get better

CUSTOMISE MESSAGES TO ADDRESS PATIENT CONCERNS



Use different materials to convey simple yet evidence-driven messages that are customised to the identified misconceptions

KEY MESSAGES RELATED TO ANTIBIOTICS

Antibiotics are ineffective against URTIs caused by viruses¹

Hello, how can I help you today?'

What symptoms are you experiencing

and what is affecting you the most?'

How do you think I can help/what

would you like me to do for you?'

'What do you understand about antimicrobial resistance?'

- Antibiotics do not have pain-relieving effects or target the inflammation underlying sore throat
- Antibiotics can cause side effects²
- If antibiotics are necessary, they should be taken in accordance with the recommendation from the patient's doctor

EMPOWER PATIENTS WITH KNOWLEDGE TO UNDERSTAND WHY SYMPTOMATIC RELIEF CAN BE **EFFECTIVE FOR URTIS**

• Use different materials to help patients understand that symptomatic relief can be effective for URTIs

EDUCATE ON SORE THROAT

- Most sore throats are caused by viral URTIs and are normally non-serious and self-limiting^{2,6}
- A key feature of sore throat is inflammation resulting in throat pain; this can be managed with symptomatic treatment options

DISCUSS OPTIONS THAT CAN PROVIDE SYMPTOMATIC RELIEF OF SORE THROAT



















Sore throat symptoms usually resolve within 1 week; if symptoms persist, seek further medical advice²

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Date of preparation: September 2023

Produced and distributed by Reckitt with the support of GRIP, which was convened and funded by Reckitt. Reckitt has funded and supported the development of this material. The views and opinions represent those of the Global Respiratory Infection Partnership (GRIP) and are not necessarily the views of Reckitt as the sponsor. The Global Respiratory Infection Partnership (GRIP) is an international group of healthcare professionals committed to reducing inappropriate antibiotic use for respiratory tract infections in primary care and the wider community, helping to counteract antibiotic resistance.

Solubles

Syrups

Gargles

Tablets Lozenges

Sprays







'I have never used antibiotics so I can't have resistant infections'

'If I take too many antibiotics, or don't take them properly, I will catch antimicrobial resistance, or I will personally become resistant to antibiotics'



KEY MESSAGES RELATED TO ANTIMICROBIAL RESISTANCE

Misuse of antibiotics can generate resistant bacteria, which can stay in the body for the next year^{3,4}

Resistant bacteria can spread between people⁴

Antibiotic resistance can make bacterial infections harder to treat and can lead to severe illness and an increased risk of complications, hospital admissions and mortality^{4,5}

Antimicrobial resistance makes it difficult to prevent patients getting infections during major surgery⁴