

RESEARCH ARTICLE

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# Prescribing style and variation in antibiotic prescriptions for sore throat: cross-sectional study across six countries

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## Abstract

**Background:** Variation in prescription of antibiotics in primary care can indicate poor clinical practice that contributes to the increase of resistant strains. General Practitioners (GPs), as a professional group, are expected to have a fairly homogeneous prescribing style. In this paper, we describe variation in prescribing style within and across groups of GPs from six countries.

**Methods:** Cross-sectional study with the inclusion of 457 GPs and 6394 sore throat patients. We describe variation in prescribing antibiotics for sore throat patients across six countries and assess whether variation in "prescribing style" – understood as a subjective tendency to prescribe – has an important effect on variation in prescription of antibiotics by using the concept of prescribing style as a latent variable in a multivariable model. We report variation as a Median Odds Ratio (MOR) which is the transformation of the random effect variance onto an odds ratio. Thus, MOR = 1 means similar odds or strict homogeneity between GPs' prescribing style, while a MOR higher than 1 denotes heterogeneity in prescribing style.

**Results:** In all countries some GPs always prescribed antibiotics to all their patients, while other GPs never did. After adjusting for patient and GP characteristics, prescribing style in the group of GPs from Russia was about three times more heterogeneous than the prescribing style in the group of GPs from Denmark – Median Odds Ratio (6.8, 95% CI 3.1;8.8) and (2.6, 95% CI 2.2;4.4) respectively.

**Conclusion:** Prescribing style is an important source of variation in prescription of antibiotics within and across countries, even after adjusting for patient and GP characteristics. Interventions aimed at influencing the prescribing style of GPs must encompass context-specific actions at the policy-making level alongside GP-targeted interventions to enable GPs to react more objectively to the external demands that are in place when making the decision of prescribing antibiotics or not.

## Background

Variation in prescription of antibiotics within and across countries is a problem of increasing concern [1–3] that needs to be seriously addressed in primary care as more than 80% of the antibiotics are prescribed at this level [4,5].

This variation can indicate poor clinical practice that increases the risk of adverse events for the patient [6],

wastes health care resources [7] and contributes to the increase of resistant strains at the societal level [8].

The multidimensional causality of variation in prescription of antibiotics has been extensively studied during the last decade and two main approaches have been taken to find solutions. The first one is a population level approach, in which the determinants and in consequence the solutions are beyond the control of medical practice. It requires structural and cultural changes at a societal level [1,9,10].

The second one is an individual approach in which variation is caused by the characteristics of the patients [2], the General Practitioners (GPs) [11–13] and the organization

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# Style Diagnoses And Prescriptions

**Diana L. Thompson**



## **Style Diagnoses And Prescriptions:**

**Prescription for Trouble Bundle #1, Code Blue & Diagnosis Death - eBook [ePub]** Richard L. Mabry, M.D., 2013-11-29 This bundle contains Code Blue and Diagnosis Death PLUS bonus chapters from Medical Error and Lethal Remedy Code Blue When Dr Cathy Sewell returns to her hometown seeking healing after a broken relationship she discovers that among her friends and acquaintances is someone who wants her out of town or dead Lawyer Will Kennedy her high school sweetheart offers help but does it carry a price tag Is hospital chief of staff Dr Marcus Bell really on her side in her fight to get hospital privileges Is Will s father Pastor Matthew Kennedy interested in advising her or just trying to get her back to the church she left years ago When one of Cathy s prescriptions almost kills the town banker it sets the stage for a malpractice suit that could end her time in town if not her career It s soon clear that this return home was a prescription for trouble Diagnosis Death The threatening midnight calls followed Dr Elena Gardner from one city to another prolonging her grief Even worse they are echoed by the whispers of her own colleagues Whispers that started after her comatose husband died in the ICU then another mysterious death during her training When a third happens at her new hospital the whispers turn into a shout Mercy killer Why doesn t she defend herself What is the dark secret that keeps Elena s lips sealed

Handbook of Human Resource Management in Government Stephen E. Condrey, 2010-08-02 HANDBOOK OF HUMAN RESOURCE MANAGEMENT IN GOVERNMENT THIRD EDITION The practice of public human resource management has evolved significantly in recent years due to increased outsourcing privatization and the diminution of public employee rights This thoroughly revised and updated edition of the classic reference Handbook of Human Resource Management in Government offers authoritative state of the art information for public administrators and human resource professionals The third edition features contributions from noted experts in the field including Donald E Klingner Mary E Guy Jonathan P West Jeffrey L Brudney Montgomery Van Wart J J Steven Ott Norma M Riccucci and many more Praise for the Handbook of Human Resource Management in Government This third edition of the Handbook of Human Resource Management in Government is an essential resource for scholars practitioners and general readers in need of concise summaries of up to date cutting edge public personnel administration research No other handbook on the market more concisely more comprehensively more clearly synthesizes this vast rapidly changing field that remains so vital to effective government performance RICHARD STILLMAN editor in chief Public Administration Review The Handbook of Human Resource Management in Government comprehensively and seamlessly blends theory and practice The result is a clear road map that can finally make HR a key player in helping the government meet the unprecedented challenges facing our nation our states and our communities BOB LAVIGNA vice president Research Partnership for Public Service Washington DC With each successive edition Condrey s Handbook of Human Resource Management in Government becomes a more essential tool for graduate students who wish to improve their understanding of this field Condrey s own expertise has enabled him to take contributions from leading experts

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over inclusive highly prevalent but predominantly mild and self limiting disorder is central to the books argument It maintains that biological reductionism in psychiatry and pharmaceutical marketing reframed depression as a brain disorder corroborating the overemphasis on drug treatment in both research and practice Finally the author goes on to explore how pharmaceutical companies have distorted the scientific literature on the efficacy and safety of antidepressants and how patient advocacy groups leading academics and medical organisations with pervasive financial ties to the industry helped to promote systematically biased benefit harm evaluations affecting public attitudes towards antidepressants as well as medical education training and practice

*Physical Diagnosis and Practical Urinalysis* John E. Clark,1890 Emerging Infectious Diseases ,2007 *Hands Heal* Diana L. Thompson,2006 The Third Edition of this widely used text provides manual therapists with much needed guidance on taking client histories setting functional goals communicating with health care and legal professionals documenting outcomes and billing insurance companies This edition includes crucial information on HIPAA regulations new and updated blank forms and lists of codes for self referred patients and for insurance verification forms Reader friendly features include sidebars case studies chapter summaries and useful appendices A front of book CD ROM includes the blank forms for use in practice a quick reference abbreviation list and a quiz tool to review key concepts Faculty ancillaries are available upon adoption

*Learning the Language of Addiction Counseling* Geri Miller,2020-12-02 Fully revised *Learning the Language of Addiction Counseling* Fourth Edition introduces students and mental health professionals to the field of addiction counseling and helps them develop the knowledge understanding and skills needed to counsel people who are caught in the destructive cycle of addiction Drawing from her years of experience working in the addiction counseling field Geri Miller provides an engaging balanced overview of the major theoretical underpinnings and clinical practices in the field From assessment and diagnosis of addiction to preparing for certification and licensure as an addiction professional this comprehensive book covers all of the essentials

**Neural Information Processing** Mufti Mahmud,Maryam Doborjeh,Kevin Wong,Andrew Chi Sing Leung,Zohreh Doborjeh,M. Tanveer,2025-07-25 The eleven volume set LNCS 15286 15296 constitutes the refereed proceedings of the 31st International Conference on Neural Information Processing ICONIP 2024 held in Auckland New Zealand in December 2024 The 318 regular papers presented in the proceedings set were carefully reviewed and selected from 1301 submissions They focus on four main areas namely theory and algorithms cognitive neurosciences human centered computing and applications

**Texas Documentation Handbook: Appraisal, Nonrenewal, Termination** ,2006 Physical Diagnosis, Diseases of the Thoracic and Abdominal Organs Egbert Le Fevre,1902 The Diagnosis of diseases of women Palmer Findley,1903 **Student Diagnosis, Placement, and Prescription** Roger B. Worner,1977 *A Manual of Clinical Diagnosis by Means of Microscopic and Chemical Methods, for Students, Hospital Physicians, and Practitioners* Charles Edmund Simon,1900 **IJER Vol 7-N1** International Journal of Educational Reform,1998-01-01 The mission of the International Journal of Educational Reform IJER is to keep

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Agassi,2012-12-06 1 GENERAL The term diagnostics refers to the general theory of diagnosis not to the study of specific diagnoses but to their general framework It borrows from different sciences and from different philosophies Traditionally the general framework of diagnostics was not distinguished from the framework of medicine It was not taught in special courses in any systematic way it was not accorded special attention students absorbed it intuitively There is almost no comprehensive study of diagnostics The instruction in diagnosis provided in medical schools is exclusively specific Clinical instruction includes in addition to vital background information such as anatomy and physiology specific instruction in nosology the theory and classification of diseases and this includes information on diagnoses and prognoses of diverse diseases What is the cause of the neglect of diagnostics and of its integrated teaching The main cause may be the prevalence of the view of diagnostics as part and parcel of nosology In this book nosology is taken as a given autonomous field of study which invites almost no comments we shall freely borrow from it a few important general theses and a few examples We attempt to integrate here three studies ll of the way nosology is used in the diagnostic process of the diagnostic process as a branch of applied ethics of the diagnostic process as a branch of social science and social technology

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