

EUROPEAN ANTIBIOTIC AWARENESS DAY
18 November 2014

Toolkit on self-medication with antibiotics

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1 Introduction

Welcome to the European Antibiotic Awareness Day Toolkit on self-medication with antibiotics prepared by the European Centre for Disease Prevention and Control (ECDC). The aim of this toolkit is to assist European public health authorities in preparing campaign materials targeting general public with specific focus on self-medication with antibiotic for the 7th annual European Antibiotic Awareness Day – 18 November 2014.

Concerted long-term efforts on awareness and appropriate use of antibiotics are key to turning the tide of antibiotic resistance. European Antibiotic Awareness Day (EAAD) is a European health initiative which aims to provide a platform and support for national campaigns about prudent antibiotic use. Last year, in over 40 countries across Europe, EAAD was marked by national events and campaigns on prudent antibiotic use during the week of 18 November. ECDC is also cooperating with its partners in other regions of the world, and campaigns on prudent antibiotic use are taking place in the United States, Canada and Australia during the week of 18 November.

The overall objective of European Antibiotic Awareness Day is to support national activities aimed at raising awareness of prudent antibiotic use among the general public as well as particular target audiences such as healthcare professionals, so as to maintain the efficacy of antibiotics and slow down the emergence and spread of resistant bacteria.

This note has been written to present the ECDC National Focal Points for AMR and for Communication and provide advice on how best to approach the issue of self-medication to antibiotics and how to adapt the toolkit materials for use at national level.

1.1 Overall strategy and objective of the toolkit

The toolkit offers advice on how national public health authorities could engage with the general public so as to promote appropriate and responsible use of antibiotics. The toolkit contains template materials and some suggested key messages focusing on self-medication with antibiotics, ideas for awareness raising activities, and suggested tactics for getting the messages across to the general public regarding prudent use of antibiotics and more specific those people self-medicating with antibiotics. The specific target audience of this toolkit material is the active population, defined as people in work, aged between 18 and 55 years old.

More information about the European Antibiotic Awareness Day is available on the European Antibiotic Awareness Day website <http://antibiotic.ecdc.europa.eu/>.

1.2 Contents of the toolkit

The toolkit includes materials described below. These materials are provided in electronic format to ECDC National Focal Points for AMR and for Communication and will be made available on the EAAD website. These materials will be described in more detail in the following sections.



- Key messages on self-medication with antibiotics;
- Template letter to pharmacists;
- Template letter to primary care prescribers;
- Posters and visual for pharmacy bags;
- Animated poster.

The communication toolkit builds on the outcomes of a report developed for ECDC in 2013: '*Self-medication with antibiotics in the European Union - Assessment and recommendations for action*'. That report mapped current knowledge regarding self-medication with antibiotics and campaigns developed to address it. It also provides recommendations for targeted campaign activities such as target audiences, areas to be addressed by key messages and channels to deliver these messages. The toolkit also builds on a) the materials already developed by ECDC in the previous years for other target audiences and b) the materials already produced in the framework of other national campaigns in Europe and in the United States.

These documents all reference the relevant scientific literature, a list of which is also provided as an Annex to this note.

2 Strategy and approach

2.1 About the target audience

The active population is recognised as the primary target audience receiving active and passive information from pharmacists and prescribers. For the purpose of this toolkit the active population is defined as people in work, aged between 18 and 55 years old.

Pharmacists are a vital conduit to communicate with patients amongst the active population. They are considered to be a secondary audience, acting as champions for prudent use of antibiotics.

2.2 Strategy and approach to self-medication with antibiotics in 2014

A number of factors have been identified as being associated with the development of antibiotic resistance, including self-medication.

The ability to self-medicate with antibiotics is dependent on access to antibiotics without a prescription for the condition for which they are being used and a willingness on behalf of the patient to take antibiotics without first consulting a doctor, but possibly in consultation with the dispensing pharmacist.

It has been previously suggested in literature that the two main routes of access to antibiotics for self-medication are via:

- Over-the-counter dispensation of antibiotics directly to the patient which, despite being illegal, is believed to occur in several European Union Member States;
- Use of 'leftover' antibiotics kept in the home that have originated either from patient non-compliance or from the dispensation of a larger number of tablets than needed for one single course. Either may have been obtained via valid prescription or through over-the-counter provision direct from pharmacies.

To this purpose, EAAD in 2014 focuses on self-medication with antibiotics amongst the active population with the goal of raising awareness of the problems with self-medication. This has been done in cooperation with the pharmacists in their role of "medicines experts" at the point of dispensation and as a secondary target audience. ECDC is cooperating with the [Pharmaceutical Group of the European Union \(PGEU\)](#) in this initiative. PGEU has agreed to support the work of ECDC in several ways, and more specifically by selecting pharmacists to participate in the evaluation of the EAAD toolkit.

The table below outlines the consecutive phases of consultation in developing the toolkit.

Feedback deadlines	Subsequent Activities
<ul style="list-style-type: none"> - Draft first ideas on target audience - Draft first ideas on strategy and approach - Draft first ideas on toolkit contents 	
04 July 2013, EAAD Technical Advisory Committee meeting, Stockholm	
<ul style="list-style-type: none"> - Initial discussion on the new focus on self-medication with antibiotics - Preliminary results of the draft report on self-medication 	
14 October 2013, PGEU working group on professional issues	
Feedback on <ul style="list-style-type: none"> - Approach & strategy - Discussion on the results of the PGEU survey on national activities 	<ul style="list-style-type: none"> - Include feedback in the approach and strategy
October 2013, Final ECDC report on 'Self-medication with antibiotics in the European Union - Assessment and recommendations for action'.	
<ul style="list-style-type: none"> - Assessment on current knowledge based regarding self-medication with antibiotics - Suggestions to ECDC on tools and guidance to member states. - Initial ideas on materials 	<ul style="list-style-type: none"> - Develop approach and strategy - Draft toolkit structure - PGEU survey on national activities
02 April 2014, Expert's input to the EAAD Technical Advisory Committee	
Feedback on <ul style="list-style-type: none"> - Approach & strategy - First key messages 	<ul style="list-style-type: none"> - Develop draft key messages - Develop concepts for materials - Draft letter to pharmacists and primary care professionals - Develop first draft of format



02 July 2014, EAAD Technical Advisory Committee meeting, Stockholm	
Feedback on: <ul style="list-style-type: none"> - key messages - posters and visuals - Letters to health professionals 	<ul style="list-style-type: none"> - Gather feedback and incorporate into drafts
August-September 2014, Focus groups testing in six EU member States (through contract with WHCA)	
Feedback on toolkit materials from focus groups and structured interviews with pharmacists (held in Bulgaria, Czech Republic, France, Italy, the Netherlands and the United Kingdom).	<ul style="list-style-type: none"> - Gather feedback from general public and pharmacists
22-23 September 2014, Meetings with stakeholders in Brussels	
Presentation of draft materials to: <ul style="list-style-type: none"> - Pharmaceutical group of the European Union (PGEU) - Standing Committee of European Doctors (CPME) - European Pharmacy Students' Association (EPSA) - European Federation of Nurses (EFN) - European Public Health Alliance (EPHA) - The European Consumer Organisation (BEUC) - The Federation of Veterinarians of Europe (FVE) - European Platform for the Responsible use of Medicines in Animals (EPRUMA) - International Animal Health Organisation (IFAH) - European Association of Senior Hospital Physicians (AEMH) - European Institute of Women's Health (EIWH) 	<ul style="list-style-type: none"> - Compile all the feedback received from all stakeholders - Amend all toolkit contents on the basis of the feedback received - Finalise draft materials and design files

2.3 Working with representative organisations of health professionals at national level

Following the consultation process with representative organisations of pharmacists and doctors, the toolkit materials have received endorsement from these organisations:

- PGEU, the Pharmaceutical Group of the European Union, www.pgeu.eu
- CPME, the Standing Committee of European Doctors, www.cpme.eu

Information about their membership is available at the following web links:

- <http://www.pgeu.eu/en/pgeu/members.html> (for PGEU)
- <http://www.cpme.eu/about/members/> (for CPME).



Given the EU-level endorsement of the campaign and the tools by these organisations, we recommend that National Focal Points approach the national members of these organisations to gain endorsement at the national level, in order to make this support more recognisable to pharmacists, primary care prescribers and patients.

3 Using the toolkit materials

3.1 General remarks

The toolkit materials are provided in an adaptable format (Word, Adobe InDesign) for easy adaptation, translation and use at national level. In addition to this toolkit, it is recommended to continue to use the supporting visuals developed in the previous years, such as the hedgehog and scarf, throughout the campaign to consolidate the initiative and continue to ensure a common visual identity for the campaigns across the EU member states. This aims to make sure messages are recognisable and consistent, and therefore memorable, to the target audience throughout the EU.

To ensure maximum outreach and resonance with the chosen target audience, each member state may of course choose to adapt the 2014 toolkit materials. All materials have been drafted in a format designed to facilitate adaptation, duplication and dissemination and limit the costs of production. The materials share a common general look and all carry the ECDC and EAAD logos, to which logos of national authorities and organisations can be added to add weight and show support for the campaign.

At the same time, these materials will be made available on the campaign website at <http://antibiotic.ecdc.europa.eu>, which will provide a resource for information and materials in a multilingual format for the target audience.

3.2 Key messages

The overall aim of European Antibiotic Awareness Day in 2014 is to increase awareness among general public about the issue of self-medication with antibiotics. The “active population” as defined above is recognised as the primary target audience receiving active and passive information from pharmacists and prescribers. Pharmacists are a vital conduit to communicate with patients amongst the active population. They are considered to be a secondary audience, acting as champions for prudent use of antibiotics.

The key messages of the campaign in 2014 are therefore specifically tailored to meet this objective. On this basis, the key messages have been devised to relate to people in work aged between 18 and 55 years old and promote the dissemination of the key messages to the general public.

The 2014 key messages self-medication with antibiotics are built on the key messages of the 2008 campaign and emphasise in particular everyone’s responsibility in keeping antibiotics effective. The messages also rely on a considerable amount of scientific literature which is referenced.



ECDC provides indicative key messages, which can be further developed or modified to fit national contexts. Plain language is used to facilitate translations.

Key messages might need to be adapted to fit specific national contexts, e.g. who can prescribe antibiotics, what to do with left-overs; specific symptoms to be added, specific symptomatic relief medicines to be added.

Below is a detailed overview of the key messages to the general public on self-medication with antibiotics:

1 Antibiotics can only be prescribed by a medical doctor who has examined you

Many winter illnesses can cause the same symptoms, but they might not require the same treatment. If you have been prescribed an antibiotic for a previous illness and have recovered well, it is tempting to want to use the same antibiotic if you have similar symptoms. However, only a medical doctor who has examined you can ascertain if a winter illness requires treatment with antibiotics.

- Never try to buy antibiotics without a prescription.
- Never save antibiotics for later use.
- Never use leftover antibiotics from previous treatments.
- Never share leftover antibiotics with other people.

Do not keep leftover antibiotic treatments. If you received more antibiotic doses (e.g. tablets, gel caps) than you were prescribed, ask your pharmacist about how to dispose of the remaining doses.

See also: <http://ecdc.europa.eu/en/eaad/antibiotics/Pages/messagesForPublic.aspx>

This key message has an authoritative tone to introduce a norm. Dispensing antibiotics over the counter is illegal in the whole EU. It also provides the adequate, normalised behaviour: only a medical doctor who has examined you can decide if you need antibiotics, i.e. not you, not a pharmacist, not your friend, etc. The term 'medical doctor' can be changed by countries to fit national contexts. It also provides a solution to the problem of unused doses of antibiotics. This can be customised by countries to fit national contexts having different waste disposal mechanisms.

2 Antibiotics are not painkillers and cannot cure every illness

- Antibiotics do not work like painkillers and cannot relieve headaches, aches, pains or fevers.
- Antibiotics are only effective against bacterial infections and cannot help you recover from infections caused by viruses such as the common cold or the flu.
- Up to 80% of winter illnesses affecting your nose, ears, throat and lungs are of viral origin, so taking antibiotics will not make you feel better.



This key message addresses the belief that antibiotics are 'cure all' medicines. It also addresses the low knowledge about the difference between antibiotics and painkiller. The term 'painkiller' can be substituted by each country with the generic term in usage.

3 Taking antibiotics for wrong reasons, such as against colds and flu, will not help you feel better faster, and may cause side-effects

Taking antibiotics against a cold or the flu has no benefit for you: antibiotics simply do not work against viral infections. In addition, antibiotics may cause several unpleasant side effects such as diarrhoea, nausea or skin rashes.

Taking antibiotics to fight mild bacterial infections, such as rhinosinusitis, sore throats, bronchitis or earaches, is often unnecessary since, in most cases, your own immune system is able to deal with such mild infections.

Most symptoms can be alleviated with over-the-counter medicines. Taking antibiotics will not reduce the severity of your symptoms and will not help you feel better faster.

If your symptoms persist or if you have any concern, it is important that you see your doctor. If you really have a severe infection such as bacterial pneumonia, your doctor will prescribe antibiotics. Seek help more quickly than other people :

- if you are over 65 years old;
- if you have asthma or diabetes;
- if you have lung disease (e.g. chronic bronchitis, emphysema, chronic obstructive pulmonary disease);
- if you have heart problems (e.g. previous heart attack, angina, chronic heart failure);
- if you have a medical problem where your immune system is suppressed; or
- if you are taking drugs that suppress the immune system (e.g. steroids, chemotherapy for cancer, some drugs used to suppress thyroid gland functions).

This message addresses the low knowledge about the difference between viral and bacterial infections. It also addresses the belief that antibiotics are a solution for people that are e.g. working and need a medicine to get better faster. In addition this message introduces other negative consequences of self-medication and addresses low knowledge of adverse side-effects, i.e. antibiotics are 'serious' medicines.

4 Take the time to get better

Meeting life's demands while being ill can be a source of stress, especially if you are experiencing certain symptoms for the first time. Finding an appropriate time to visit the doctor can be difficult, expensive and time-consuming. Knowing how to manage your



symptoms can help you cope better with your illness. Learn how you can take care of yourself without antibiotics.

For most winter illnesses, your condition will improve after two weeks

Indicative duration of symptoms for common winter illnesses in adults ¹	
Ear infection	up to 4 days
Sore throat	up to 1 week
Common cold	up to 1 ½ weeks
Flu	up to 2 weeks
Runny or congested nose	up to 1 ½ weeks
Sinus infection	up to 2 ½ weeks
Cough (which often happens after a cold)	up to 3 weeks

If your symptoms persist or if you have any concern, it is important that you consult your doctor.

This key message is adapted from 'Get better without antibiotics', Health Service Executive Ireland and from 'Patients antibiotic information leaflet', Royal College of General Practitioners. This can be customised by countries to fit national contexts.

It addresses the findings that people tend to self-medicate when they experience new symptoms, i.e. unusual symptom.

5 Ask your pharmacist for advice: other medicines can help relieve your symptoms

Your pharmacist may recommend over-the-counter medicines to help alleviate your symptoms.

Always ask for advice, especially if you are taking medicines for any other condition.

- Painkillers relieve aches, pains and fevers.
- Anti-inflammatory medicines, such as throat sprays or pastilles, help you swallow more easily.
- Oral expectorants clear secretions in your airways.
- Nasal sprays and decongestants help you breathe more comfortably.
- Antihistamines alleviate stuffy, sneezy and itchy noses.

Drinking plenty of fluids and getting some rest will help improve any winter illness.

¹ Table adapted from 'Get better without antibiotics', Health Service Executive Ireland, and 'Patients antibiotic information leaflet', Royal College of General Practitioners. Available from: http://www.hse.ie/eng/services/news/Get_better_without_antibiotics_leaflet.pdf and <http://www.rcgp.org.uk/clinical-and-research/target-antibiotics-toolkit/patient-information-leaflets.aspx>



This key message empowers individuals, i.e. it provides suggestions about what medicines to take to feel better. It also empowers pharmacists, i.e. it provides suggestions about other medicines a pharmacist can suggest when a patient asks for antibiotics without having a prescription.

This key message can be customised by countries to fit national contexts.

The key messages are the basis of the toolkit materials and should be used when developing any additional materials targeted at the general public and focussing on self-medication with antibiotics.

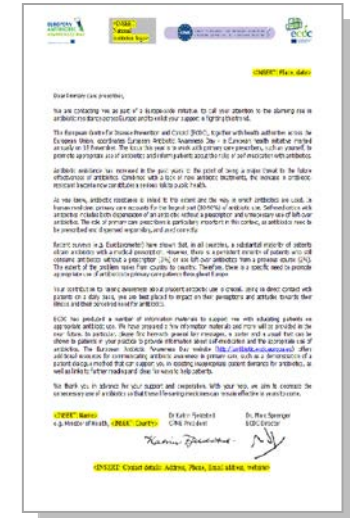
3.3 Template letter to pharmacists and primary care prescribers

Two template letters have been drafted for national public health authorities to send to pharmacists and primary care prescribers to introduce European Antibiotic Awareness Day (EAAD), to promote appropriate use of antibiotics and inform patients about the risks of self-medication with antibiotics. The letters are signed by the ECDC Director Marc Sprenger and the Presidents of PGEU (Stefan Krchňák) and CPME (Katrín Fjeldsted) and carry the ECDC and EAAD logos in addition that of PGEU and CPME. The letters are provided in Word format which allows for the addition of the logo of national health authorities and the signature of the national health minister or other endorsing organisations where appropriate.



These letters have been translated in all EU languages but could be adapted to include relevant national details, then sent to pharmacists and primary care prescribers as an introduction of European Antibiotic Awareness Day initiative and a call for their participation in this initiative. The letters explain the extent of AMR and provide related facts and figures. Furthermore, the letters call for attention to the alarming rise in antibiotic resistance across Europe. The letters ask pharmacists and primary care prescribers for their support to fight this negative trend and promote the European Antibiotic Awareness Day website as a useful resource for communicating on prudent use of antibiotics.

The letters should accompany materials for use by pharmacists and primary care prescribers such as the EAAD visuals and key messages. Other materials developed at the national level which can be used by pharmacists and primary care prescribers can also be included, e.g. gimmicks, leaflets.



3.4 Posters and visual for pharmacy bags

ECDC has produced two concepts (concept 1 and 2), with three alternative options within each concept.

Both concepts have been tested in the focus groups and via structured interviews with pharmacists. This work highlighted national specificities and preferred concepts in the six EU member states where the focus groups took place.

Concept 1 (single gel cap/tablets) is data driven. It illustrates data from the 2013 [Eurobarometer](#) on antibiotic consumption and knowledge. The three versions offer three different messages at the bottom of the poster, to be used for display in different locations: 1) 'Antibiotics. Use them wisely – and never against colds and flu'; 2) 'Antibiotics. Ask your doctor for advice: other medicines can help relieve your symptoms'; and 3) Antibiotics. Ask your pharmacist for advice: other medicines can help relieve your symptoms'.



Concept 2 (knight, sunscreen, computer antivirus software) is thought-provoking. It targets the general population more specifically, with a catchy concept that brings out the absurdity of using antibiotics to treat viral infections such as colds or flu.



ECDC does not want to encourage in any way the overuse of bags, as in most countries there is an effort to discourage their use in order to reduce unnecessary waste. Nevertheless, it is clear that in some countries where the focus groups took place pharmacy bags become a sort of "semi-permanent container" of medicines and of medical records and therefore could be used to print one of the visuals and promote the message related to prudent antibiotic use. This suggestion was also welcomed in the framework of the discussions within the EAAD Technical Advisory Committee. The final focus group report showed that Concept 2 (knight) was identified as the best option to be used on pharmacy

bags. Therefore ECDC provided within the toolkit also a visual to be used on pharmacy bags, based on Concept 2 (knight).



A wide variety of suggestions were made for display including pharmacy windows, healthcare provider waiting rooms, hospitals, public transport, senior centres, supermarkets, roadside billboards, rears of buses, direct advertising on internet.

The posters will be translated in all official EU languages and will be accessible through the EAAD website.

In case you would like to modify the files, please note that before opening the Illustrator or InDesign file you need install the Font package (Meta Pro). Please do not open the .ai file without having the fonts installed first. In addition, ECDC would like to highlight if a public health authority or an organisation outside of ECDC modifies the file and installs the font is required to de-install the font after finishing the modification. ECDC is not allowed to grant a license for the font. We would appreciate if no additional graphic elements are pasted, except additional logos. Also, please do not change colours, spacing, arrangement or font size (if not absolutely necessary). ECDC is happy to double check modifications. Please state ECDC as the source of this graphic.

3.5 Animated poster

ECDC decided to develop a short animation based also on the data from the 2013 [Eurobarometer](#) on antibiotic consumption and knowledge, similar to concept 1, but more detailed in terms of messages. The animation will be available for watching, sharing and embedding on the EAAD website and on the ECDC YouTube channel.

The purpose of the animated poster is to provide the viewer with more information than in the concept 1. In order to do so, several facts about the knowledge of Europeans about antibiotics are extrapolated and presented in simple messages. The take-home message is one of the key messages provided in the toolkit. The animation could be used as a TV spot or as a web spot in pharmacies, hospitals, GP waiting rooms if provided with TV screens, residential homes, and TV channels. Countries requesting a full resolution master of the animation for further distribution will receive a link for downloading the full resolution file.

3.6 Other ideas for materials that could be developed in addition to the toolkit

The materials in this toolkit should provide a solid core for the 2014 EAAD campaign targeted at the general public with focus on self-medication with antibiotics. Depending on available resources, the National Focal Points for AMR and National Focal Points for Communication may consider developing other materials, either as information tools or for dissemination to patients.

During various rounds of brainstorming, a few ideas emerged as to possible additional tools, hand-outs or “gimmicks” for the general public or health professionals.

- EAAD-branded survivor’s pack for the winter instead of antibiotics: blanket, tea, scarf, tissues, vitamins, information booklet;
- EAAD-branded paper tissues with key messages or visuals (‘Take care not antibiotics!’);
- EAAD-branded scarves, blankets, hats, gloves, ear warmers, socks;
- EAAD-branded bowls, cups or mugs – branded plastic cups for indoor water fountains
- EAAD-branded bath salts;
- EAAD-branded key chains;
- Tea cosy inspired by the scarf visual;
- EAAD-branded box of sweets / mints / lemon drops;
- Non-prescription pads - notepads with instructions for patients on how to take care of themselves when suffering from a cold or flu. Tick boxes can include similar messages as on patient brochure;
- Antibiotics instructions sheet for patients who require antibiotic prescriptions, for example containing information on what to take; how much/how many tablets/gel caps; what to do with remaining tablets/gel caps; how important it is to take antibiotics properly;
- Pre-printed origami for offices: how to make a paper cup for a hot cup of tea;
- Oranges with EAAD-branded stickers containing key messages or visuals;
- Small stuffed toy inspired by the hedgehog visuals.

Any additional materials developed in the context of the EAAD campaign should bear the EAAD logo and be accompanied by the text “A European Health Initiative” and the EU flag. The logo and text are available on the EAAD website in all EU languages, as well as Icelandic and Norwegian, and are also available in design format on the EAAD website to allow for easy adaptation.

4 Key contacts

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