

Use of antibiotics for respiratory tract infections in adults and children

Information for the public

Published: 1 July 2008

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About this information

NICE clinical guidelines advise the NHS on caring for people with specific conditions or diseases and the treatments they should receive. The information applies to people using the NHS in England and Wales.

This information explains the advice about the use of antibiotics for respiratory tract infections in adults and children that is set out in NICE clinical guideline 69.

Does this information apply to me?

Yes, if you:

- have seen your GP or nurse practitioner because of a respiratory tract infection
- are the parent or carer of a child aged 3 months or older who has a respiratory tract infection.

The NICE guideline does not specifically look at further care for adults and children (3 months and older) who need investigations and/or immediate antibiotics.

Your care

Your treatment and care should take into account your personal needs and preferences, and you have the right to be fully informed and to make decisions in partnership with your healthcare team.

To help with this, your healthcare team should give you information you can understand and that is relevant to your circumstances. All healthcare professionals should treat you with respect, sensitivity and understanding and explain RTIs and the treatments simply and clearly.

The information you get from your healthcare team should include details of the possible benefits and risks of particular treatments. You can ask any questions you want to and can always change your mind as your treatment progresses or your condition or circumstances change. Your own preference for a particular treatment is important and your healthcare team should support your choice of treatment wherever possible, but this does depend on your age. If you are over 16, or under 16 and fully understand the treatment, you may be able to give your own agreement. If you are too young, your parents or carers may need to agree to your treatment.

Your treatment and care, and the information you are given about it, should take account of any religious, ethnic or cultural needs you may have. It should also take into account any additional factors, such as physical or learning disabilities, sight or hearing problems, or difficulties with reading or speaking English. Your healthcare team should be able to arrange an interpreter or an advocate (someone who supports you in putting across your views) if needed.

All treatment and care should be given with your informed consent. If, during the course of your illness, you are not able to make decisions about your care, your healthcare professionals have a duty to talk to your family or carers unless you have specifically asked them not to. Healthcare professionals should follow the Department of Health's advice on consent (www.gov.uk/government/publications/reference-guide-to-consent-for-examination-or-treatment-second-edition) and the code of practice for the Mental Capacity Act. Information about the Act and consent issues is available from www.nhs.uk/CarersDirect/moneyandlegal/legal. In Wales healthcare professionals should follow advice on consent from the Welsh Government (www.wales.nhs.uk/consent).

Respiratory tract infections (RTIs)

Infections such as ear infections, sore throat, sinusitis, cough and the common cold are widespread. Doctors often use the term respiratory tract infection (RTI) to include any – or all – of these infections.

Most RTIs are caused by a virus and clear up on their own. Viruses cannot be killed by antibiotics – only bacterial infections can be effectively treated with antibiotics.

Each viral infection you get is caused by a slightly different virus, and once you've fought it off, you are immune (resistant) to that particular virus.

Typical total duration of an RTI

- Ear infection: 4 days
- Sore throat: 1 week
- Common cold: 1½ weeks
- Sinusitis: 2½ weeks
- Cough: 3 weeks

First appointment

If you think that your care does not match what is described in this information, please talk to a member of your healthcare team.

When you first see the doctor or nurse practitioner (a nurse with specialist training who can prescribe some medications), he or she should ask about your symptoms, what medicines or treatments you have been taking, your medical history and whether you have any other medical conditions that might be important. The doctor or nurse practitioner may examine you. For example, he or she may listen to your chest through a stethoscope or look in your ears through an otoscope.

The doctor or nurse practitioner should ask about your own concerns and expectations when talking to you about whether antibiotics are needed.

If you have an RTI that is expected to clear up on its own, you should be offered either a delayed prescription for antibiotics or no prescription at all. The rest of this information tells you more about RTIs and when antibiotics work best.

No antibiotics

If you have not been offered antibiotics, this is because your RTI should clear up on its own. See above for more information on how long RTIs usually last and [Managing symptoms](#) for more information on how you can help relieve the symptoms.

You should be reassured that antibiotics are not necessary immediately because they will not help your symptoms. In addition, antibiotics can cause unpleasant side effects, such as sickness, diarrhoea or skin rashes. You should make another appointment if your infection gets worse or lasts for longer than expected.

Delayed antibiotics

You may be offered a 'delayed prescription' for antibiotics. This will either be a prescription that you take to the chemist at a later date if your symptoms do not improve or get worse, or a prescription that you collect at a later date from a convenient location (for example, the surgery reception).

If you are offered a delayed prescription, this is because your RTI should clear up on its own. See [Respiratory tract infections \(RTIs\)](#) for more information on how long RTIs usually last and [Managing symptoms](#) for more information on how you can help relieve the symptoms.

You should be reassured that antibiotics are not needed immediately because they will not help your symptoms. In addition, antibiotics can cause unpleasant side effects, such as sickness, diarrhoea or skin rashes. You should use the delayed prescription if your symptoms are not starting to go away or if you start to feel worse.

You should make another appointment if your symptoms get worse despite using the delayed prescription.

Questions you might like to ask

- When should I start to feel better and what should I do if I don't start to feel better by then?
- Is there anything I can do to help myself get better?

- When and how should I seek further help?
- Is there any written material (like a leaflet) that I can have?

Immediate antibiotics

Your doctor or nurse practitioner can also offer an immediate prescription for:

- children who are younger than 2 years with an ear infection (called acute otitis media) that affects both ears
- children who have both acute otitis media and discharge from the ear
- people with severe sore throat who have swollen lymph nodes, discharge on their tonsils and fever.

Immediate antibiotics for people at risk of complications

You may be offered an immediate prescription for antibiotics or further checks or investigations if:

- you are very unwell
- you have signs or symptoms of serious illness or complications (especially pneumonia, an infection of the mastoid bone behind the ear called mastoiditis, a complication of tonsillitis called a peritonsillar abscess, or problems that affect the bones of the head)
- you have another medical condition that makes you more at risk of a complication from the RTI, for example heart, lung or kidney disease, neuromuscular disease (such as muscular dystrophy), cystic fibrosis or if your immune system has been weakened (for example by immunosuppressive medicines used after a transplant or in cancer therapy). Young children who were born prematurely are also more at risk of a complication.
- you are older than 65 years and have a cough and two or more of the following, or if you are older than 80 years and have a cough and one or more of the following:
 - you have been admitted to hospital in the past year
 - you have diabetes
 - you have a history of congestive heart failure

- you are taking steroid medicines.

See [Respiratory tract infections \(RTIs\)](#) for more information on how long RTIs usually last and [Managing symptoms](#) for more information on how you can help relieve the symptoms.

Questions you might like to ask

- When should I start to feel better and what should I do if I don't start to feel better by then?
- What should I do if I get any side effects from the antibiotics?
- Are there any foods or drinks that I should avoid?
- Is there anything I can do to help myself get better?
- When and how should I seek further help?

Managing symptoms

You can take paracetamol or ibuprofen to relieve headache, aches and pains and fever.

You may also wish to ask your pharmacist for advice about over-the-counter remedies such as cough medicines, decongestants or throat pastilles.

If you are taking medicines for any other condition it is important to check with your doctor or pharmacist before you take any over-the-counter remedies.

Remember – always check the instructions on the bottle or packet and never take more than the recommended dose. If you are not sure, ask your doctor, nurse practitioner or pharmacist for help and advice.

More information

You can go to NHS Choices (www.nhs.uk) for more information.