# Respiratory Tract Infections in children – A GP's Perspective

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#### **Respiratory Tract Infections**

Most Common reason for presentation of children to General Practice

Most common reason for prescription of antibiotics

High degrees of uncertainty

#### Two stage assessment

#### **Initial Impression**

- Child walking or being carried
- General demeanour
- Level of interaction with environment
- Respiratory rate
- Some of this based on previous knowledge of the child

#### **Focussed Examination**

- In well child to rule out unexpected findings
- Parental reassurance
- In unwell child to assess level of seriousness of condition.

#### Factors affecting presentation

- "It's gone on too long"
- RTI can last up to 3 weeks
- 50% acute cough gone in 10 days

Previous hospitalisation of child or sibling

Parental Anxiety – GP may no family well

### Factors Affecting Decision to prescribe antibiotics

- Perceived parental pressure
- Multiple attendances during the same illness episode (pressure to do something)
- Concern around parental ability to follow safety netting advice
- Preservation of relationship
- Timing of consultation holiday / weekend
- Lower ratings in GP Surveys

## Factors affecting decision to prescribe antibiotics

- Clinicians confidence in this age group (previous paeds experience)
- Time pressure on clinician ?quicker to acquiesce.
- Lack of imaging / NPT
- Fear of missing diagnosis (Overworked Gp's)

## Follow up

- Safety netting
- Delayed prescribing
- Confidence in decision
- Written information on red flags / illness duration

#### **Prescribing Antibiotics**

Formularies

#### SAPG / GG&C Antimicrobial apps

**BNF** for children

### **Prescribing Antibiotics**

• Caution re side effects

 Potential raised expectation of further antibiotics