

Save antibiotics for when you really need them

The call to reduce unnecessary use of antibiotics is coming from many fronts, including the CDC, medical specialty societies and Consumer Reports Health. Antibiotics should be used **only** when your doctor **is sure** that there is a bacterial infection.

What you can do

Whenever you are prescribed antibiotics, make sure you understand why you need them. Here are some questions for you and your loved ones to ask your doctor:

- »Why do I need antibiotics?
- »How should I take the medication?
(for example, with or without food?)
- »What are common side effects?
- »What if I do not feel better in a few days?
Or what if I feel worse?
- »When should I stop the medication?

Understanding the risks of using antibiotics when not needed leads to good, safe care. The safest care happens when you partner closely with your medical team, to understand and follow the most current advice.

Other Resources For You

www.cdc.gov/getsmart/healthcare/pdfs/GetSmartWeek_NursingHomes.pdf

*Prepared by the Massachusetts Infection Prevention Partnership
Massachusetts Department of Public Health
Massachusetts Coalition for the Prevention of Medical Errors
Massachusetts Senior Care Association*

Additional copies available at macoalition.org/uti-elderly-tools

Suspect a Urinary Tract Infection?

How Taking Antibiotics When You Don't Need Them Can Cause More Harm Than Good

An Important Message for Seniors and their Families



Did You Know That...

- »Up to 50 percent of all antibiotics prescribed are not needed or are not prescribed appropriately?
- »Confusion or sudden behavior changes don't necessarily indicate a urinary tract infection (UTI)?
- »As many as half of seniors living in long-term care settings will test positive for bacteria in their urine, **without actually having a UTI?**

Learn Why The CDC is Sounding The Alarm About The Overuse of Antibiotics



Massachusetts Coalition
for the
Prevention of Medical Errors



Antibiotics Are Powerful Drugs When Used For The Right Reasons

Antibiotics are strong drugs that fight infections caused by bacteria. Overuse of these drugs can cause problems and they should be used only when needed.

How Antibiotics Can Cause More Harm Than Good

Older people have more side effects from medicines, which can cause problems all over the body. Sometimes antibiotics can:

- » Lead to a drug interaction, where one of your medications could become less effective or cause you to develop new symptoms.
- » Cause nausea, vomiting or diarrhea.
- » Cause rashes or allergic reactions.
- » Harm your kidneys or other organs, or cause nerve damage.
- » Cause a painful, highly contagious and potentially deadly form of diarrhea resulting from the bacteria *Clostridium difficile* (“C.diff”).

Each time you take an antibiotic, you increase your risk of **developing a resistant infection in the future.**

The Antibiotic Resistance Crisis

The overuse of antibiotics has contributed to increasing antibiotic resistance – **which is the ability of bacteria to resist the effects of an antibiotic.** When resistance occurs, it can be harder to find the right drug to treat an infection. Fighting resistance requires stronger drugs and more healthcare, and recovery may take more time.

“Antibiotic resistance is rising for many different pathogens that are threats to health. If we don’t act now, our medicine cabinet will be empty and we won’t have the antibiotics we need to save lives.”

– Dr. Tom Frieden, Director of the Centers for Disease Control and Prevention (CDC)

Spotlight on Urinary Tract Infections in Seniors

One of the most frequent reasons seniors are prescribed antibiotics is urinary tract infection (UTI). We know, however, that many of these UTIs are misdiagnosed. A urinary tract infection is caused by bacteria that involves any part of the urinary system including the urethra, bladder, ureters and kidneys.

So if a test shows bacteria, does this mean I have a UTI?

Not necessarily. Diagnosis of a UTI requires **both** finding bacteria on a urine test **and** the presence of specific symptoms. Having **both** is important, because bacteria can and do live naturally in the bladder without causing any pain or symptoms. This is called **asymptomatic bacteriuria**, which is present in as many as half of seniors living in long-term care settings.

What are the specific symptoms of a UTI?

- » a burning feeling, discomfort or pain with urination.
- » pain in the lower abdomen or back.
- » increase in frequency (needing to “go” more often than usual).
- » repeated strong urges to urinate.
- » blood in the urine.

These symptoms may or may not be accompanied by fever.

What about other symptoms, such as confusion or a sudden change in behavior?

UTI is less likely without the specific symptoms listed above.

Non-specific symptoms such as confusion, a sudden change in behavior, fatigue or a fall may be caused by other factors, including:

- » dehydration
- » inadequate nutrition
- » poor sleep
- » depression
- » medication side effects
- » constipation

It is important to consider a range of possible causes, to prevent missing the real diagnosis.

I was prescribed antibiotics before. Why not now?

In the past, when a urine specimen tested positive — *even when no symptoms of infection were present* — doctors were taught that treatment with antibiotics was the right approach. **We know now that is not correct.**

The American Geriatric Society now recommends to physicians **“Don’t use antimicrobials (antibiotics) to treat bacteriuria in older adults unless specific urinary tract symptoms are present.”**