
Pressure To Prescribe: More Antibiotics Ordered Where Physicians Compete With Clinics



Wealthier areas of the US have more antibiotic prescriptions written per capita, where there is greater competition among care providers, according to new research from Johns Hopkins. Patients in such areas may be more able and likely to shop for physicians who are willing to write a prescription. As a result, doctors' offices compete with retail medical clinics and urgent care centres for satisfied and loyal customers.

"We were surprised to find in this study that there is a really strong suggestion in the data that physicians are competing with other physicians, and they are doing that through the mechanism of prescribing antibiotics," said Eili Klein, PhD, lead author of the study and an assistant professor of emergency medicine at Johns Hopkins University School of Medicine. Klein is also a member of the Johns Hopkins Center for Advanced Modeling in the Social, Behavioral and Health Sciences.

The Wealth Connection

Klein and his colleagues performed a comparative analysis of data collected between 2000 and 2010 by the US Census Bureau and the IMS Health Xponent database. The Xponent database tracks prescriptions by zip code. Antibiotic prescription rates were widely variable overall across the US, but were notably high in some of the major metropolitan areas of the East and West coasts: Manhattan, Miami and Encino, California.

Physicians prescribed more medications in wealthy areas where there are many retail and urgent care clinics, including chain drug stores and "superstores". However, the presence of such clinics in poorer areas of the US did not have the same correlation with the prescribing behaviour of physician offices.

Pressure to Prescribe

"It speaks to the fact that health care is a business," Klein said. "But it also underscores that there is a lot of pressure on doctors to prescribe antibiotics — even when they aren't 100 percent certain they are necessary." The limited amount of time spent with patients may contribute to the pressure to prescribe. Whereas it may take just five minutes to see a sick patient and prescribe an antibiotic, explaining to the patient why such a prescription is not necessary could take 15 minutes, Klein explained.

The overuse of antibiotics is contributing to a public health crisis, and the researchers hope that the study findings will lead to physician education about the widespread effects of their antibiotic prescribing behaviours. According to the Centers for Disease Control and Prevention, antibiotic overuse leads to drug resistance, threatening worldwide health and resulting in 23,000 deaths per year in the US.

The findings appear online ahead of print publication in the *Journal of Antimicrobial Chemotherapy*. The other authors of the study are Michael Makowsky and Erez Hatna of the Johns Hopkins Department of Emergency Medicine; Megan Orlando and Ramanan Laxminarayan of Princeton University; and Nikolay P. Braykov of the Center for Disease Dynamics, Economics and Policy.

Source: [Johns Hopkins Medicine](#)

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