Acute bronchitis: should I take antibiotics?

- This decision aid is to help you decide whether to use antibiotics when you or your child has acute bronchitis (acute cough).
- This can help you to talk and make a shared decision with your doctor about what is best for you or your child.

What causes acute bronchitis?

- It can be caused by a viral or bacterial infection. It is hard for your doctor to tell which it is.
- The infection is in the airway (bronchi) leading to the lungs. Acute means it is a short-term infection.

How long does the cough last?

- The cough will usually get better by about 10-20 days, without needing to take antibiotics.

What are the treatment options?

There are 2 options that you can discuss with your doctor:

1. Not taking antibiotics
   - This means letting the cough get better by itself.
   - Symptoms, such as fever, can be treated with over-the-counter medicines. They can be used with either option.

2. Taking antibiotics

What are the likely benefits and harms of each option?

These figures show what happens to people with acute cough who do not take antibiotics and those who do. Each circle is one person. We can’t predict whether you will be one of the people who is helped or harmed.

- gets better by 1-2 weeks
- gets better by 1-2 weeks due to antibiotics
- not better by 1-2 weeks

100 people who don’t take antibiotics

- 50 get better by 1-2 weeks
- 68 get better by 1-2 weeks due to antibiotics
- 50 not better by 1-2 weeks

With antibiotics, 18 more people will be better after 1-2 weeks.

100 people who take antibiotics

- 19 has problems
- 23 has problems due to antibiotics
- 81 no problems

With antibiotics, 4 more people will have problems like vomiting and diarrhoea. Other antibiotic harms are:
- the cost of buying them
- remembering to take them
- the risk of antibiotic resistance (see next page)
Questions to consider when talking with your doctor

- Do I need antibiotics?
- What happens if I don’t take antibiotics?
- Do I know enough about the benefits and harms of:
  - taking antibiotics?
  - not taking antibiotics?
- Am I clear about which benefits and harms matter most to me?
- Do I have enough information and support to decide?

Where do these estimates of benefits and harms come from?

- They come from the most up-to-date medical evidence of benefits and harms about what works best. This is a review of 17 studies, and over 5000 people, that looked at antibiotic use in people with acute bronchitis.
- The quality of this research evidence is ranked as high. This means that further research is very unlikely to change these estimates.

Why might antibiotics be used?

If the infection is in the lung, it is called pneumonia. This is unlikely. However if it is pneumonia, it can be more serious. Your doctor may talk with you about why antibiotics might be needed. Coughing up coloured phlegm (spit) is not a sign that antibiotics are needed.

What is antibiotic resistance?

- Using antibiotics means the bacteria can develop resistance to the antibiotic.
- This means that **antibiotics will not work if you or your child needs them in the future** to treat a bacterial infection.
- A person who has recently used antibiotics is more likely to have resistant bacteria in their body.

Are there other things I can do?

- Fever is best treated with over-the-counter **paracetamol and/or ibuprofen**. Do not give more than the maximum recommended dose. Read the dose information on the packet.
- Aspirin should NOT be used with children who are younger than 16 years.
- Some people find that taking **honey** helps to settle the cough. Take 1-2 teaspoons, just before bedtime. The honey can be given in a drink such as warm water. Honey should not be given to children less than 12 months old.

When should you see a doctor and get further help?

If the person with the cough has any of these signs:

- Very drowsy
- Fast or difficulty breathing, wheezing, or shortness of breath
- Cold or discoloured hands and/or feet with a warm body
- Pain in the arms and/or legs
- Coughing blood
- Unusual skin colour (pale or blue) around the lips
- A rash that does not fade when the skin is pressed

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References


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