Reviewer’s report

Title: Prescription of antibiotics and anxiolytics/hypnotics to asthma patients in general practice: A cross-sectional study based on French and Italian prescribing data.

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Reviewer: John Yaphe

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A review of “Prescription of antibiotics and anxiolytics/hypnotics to asthma patients in general practice: A cross-sectional study based on French and Italian prescribing data” for BMC Family Practice

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General

This paper presents the results of a study of data from a large database of patients treated in General Practice in Italy and France regarding the prescription of antibiotics and anxiolytics to patients with asthma. Both antibiotics and anxiolytics may be over-prescribed in poorly controlled asthmatics, who may benefit instead from inhaled corticosteroids and other agents. The study found high rates of prescribing of these drugs with differences by gender and age and between countries. As such, this study contributes to our knowledge of rational prescribing habits in general practice in these two countries.

Abstract

The abstract is brief and clear and presents the main points of the study.

The authors may wish to include that the chi-square test was used to compare proportions.

Although the authors state in the cover letter that a professional English editing company reviewed the paper, there are still some phrases that sound strange to a native English speaker.

Minor Essential Revisions

1. Line 3 should read: “guidelines ARE OFTEN inadequately followed”
2. Line 6: associations should be plural
3. Line 7: prescription should be singular

Background
The introduction to the paper places the problem in context and quotes relevant literature.

Minor Essential Revisions

4. The sentence in lines 35 and 36 (about the consequences of antibiotic prescribing) is unclear and appears to be missing a verb.

Methods

The source of data is adequately described with references to previous publications form this database.

The data extraction method is clearly described.

Minor Essential Revisions

5. What is missing is the definition of the main outcome variable, which is the prescription of anxiolytics and antibiotics. I assume that each prescription was counted once. The authors need to justify why they did not use DDD or DUD, which allow for comparisons between studies of prescribing habits. This needs to be mentioned in the background and in the methods section.

The inclusion criteria are clear, using the HEDIS definition to identify asthmatic patients. The choice of asthma drugs, antibiotics and anxiolytics is logical.

Minor Essential Revisions

6. The analysis chosen is relevant. No tests of significance are mentioned but as odds ratios were calculated the calculation of 95% confidence intervals should be mentioned, as it is at the end of Table 3.

Results

The results are clearly and simply presented in the text and tables.

Discussion

The main findings are briefly and clearly restated in the first paragraph of the discussion.

The strengths and weaknesses of the study are stated fairly. The main weakness as stated is the use of the HEDIS criteria, which uses prescription data for definition of asthma cases.

Minor Essential Revisions

7. Line 157 should read “Antibiotic prescription” and the same in line 171 and 174.

The possible reasons for excess prescribing of these drugs to asthmatics are explored and compared to published findings in the literature.
The implications and conclusions are justified by the findings of this study.

**Level of interest:** An article of importance in its field

**Quality of written English:** Needs some language corrections before being published

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

I declare that I have no competing interests.