



Effective Health Care

Acute Cough Illness

Nomination Summary Document

Results of Topic Selection Process & Next Steps

- *Acute Cough Illness (ACI)* will go forward for refinement as a systematic review. The scope of this topic, including populations, interventions, comparators, and outcomes, will be further developed in the refinement phase.
- When key questions have been drafted, they will be posted on the AHRQ Web site and open for public comment. To sign up for notification when this and other Effective Health Care (EHC) Program topics are posted for public comment, please go to <http://effectivehealthcare.ahrq.gov/index.cfm/join-the-email-list1/>.

Topic Description

Nominator(s): *Organization*

Nomination Summary: The nominator is interested in understanding the comparative effectiveness of alternative strategies, including educational strategies and antibiotic management, for reducing inappropriate antibiotic use for acute cough illness (ACI).

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Population(s): Individuals with acute cough illness **Intervention(s):** Educational and antimicrobial strategies for reducing inappropriate antibiotic use in ACI

Comparator(s): Educational strategies, antimicrobial strategies, combinations of these, and control (usual care)

Outcome(s): Reduction in antibiotic use

Key Questions from Nominator: For persons who present with ACI, what is the comparative effectiveness of various interventions for reducing inappropriate antimicrobial use?

Considerations

- The topic meets all EHC Program selection criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)
- ACI is an umbrella term used to describe a non-specific cough in persons with a normal chest radiograph, occurring with or without phlegm production, usually lasting less than 3 weeks. Conditions

that are encompassed by the term ACI include acute bronchitis, upper respiratory infection, acute respiratory infection, rhinitis, and the common cold. ACI is the most frequent reason for medical care sought in emergency and non-emergency settings. Diagnosing ACI involves ruling out underlying conditions or diseases responsible for the cough, e.g., pneumonia or less commonly pertussis. ACI is often a self-limiting condition usually resulting from a common viral infection. Existing clinical guidelines recommend against routine antibiotic use for ACI in otherwise healthy adults and children with a cough.

- A scan of relevant evidence revealed a 2006 AHRQ systematic entitled, “Closing the Quality Gap: A Critical Analysis of Quality Improvement Strategies Volume 4—Antibiotic Prescribing Behavior.” Since that review, a number of trials have been published. The conclusions in the most recent clinical trials note that a decrease in antibiotic use was associated with delayed antibiotic strategies, patient education, and physician education and are consistent with the 2006 AHRQ report.
- While it is clear the antibiotics are not useful, a new systematic review on this topic can be used to inform provider and patient education strategies, practice guidelines, and clinical decision making.