



## NEWS RELEASE

### FOR IMMEDIATE RELEASE

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### **Association between clinician distress and inappropriate use of antibiotic prescriptions**

*Study in May 2022 issue of The Joint Commission Journal on Quality and Patient Safety*

(OAKBROOK TERRACE, Illinois, April 26, 2022) – The overprescribing of antibiotics in U.S. outpatient settings is an urgent public health concern. The majority of these antibiotic prescriptions are written for acute respiratory tract infections (RTIs), even though antibiotics are inappropriate for treating viral RTIs such as bronchitis, sore throats, common colds and the flu.

A new study from the May 2022 issue of *The Joint Commission Journal on Quality and Patient Safety*, "[Clinician Distress and Inappropriate Antibiotic Prescribing for Acute Respiratory Tract Infections: A Retrospective Cohort Study](#)," examined the association between clinician distress and the inappropriate use of antibiotic prescriptions for acute RTIs in adult outpatients.

The researchers evaluated electronic health record visit data linked to annual wellness surveys administered to all clinicians at Boston Medical Center, Boston. Outpatient visits included those in family medicine, general internal medicine and the emergency department where an acute RTI for an otherwise healthy adult was listed as a primary diagnosis.

Clinician depression, anxiety and burnout were assessed using the National Institute of Health Patient Report Outcomes Measurement Information System and the Stanford Professional Fulfillment Index Burnout Composite scale obtained from clinician wellness survey data collected up to six months prior to a patient visit.

Overall, approximately 34% and 50% of clinicians in the study reported depression/anxiety and burnout symptoms, respectively. Findings showed each one standard deviation increase in a clinician's composite depression and anxiety score was associated with a 28% increase in the

odds of an inappropriate antibiotic prescription for an acute RTI. Clinician burnout had no significant association with inappropriate antibiotic prescribing.

“Although the current study was conducted in the pre-COVID-19 era, it is plausible that had this work been repeated during the height of the pandemic, the unique stressor imposed by the COVID-19 pandemic would have shown an even greater prevalence of depression and/or anxiety among clinicians,” notes an accompanying editorial by Sara C. Keller, MD, MSHP and Pranita D. Tamma, MD, MHS. “We applaud Brady and colleagues for shedding light on an important and unrecognized area in need of intervention—the impact of provider mental health on inappropriate antibiotic prescribing.”

For more information on healthcare worker well-being, please access The Joint Commission’s [Quick Safety, Issue 50: Developing resilience to combat nurse burnout](#) and the National Academy of Medicine’s [Resource Compendium for Healthcare Worker Well-Being](#).

Also featured in the May issue:

- [The Atlas Context Data Repository: A Feasible, Acceptable, and Useful Prototype for Context Data Collection and Future Predictive Analysis](#) (eight U.S. healthcare sites)
- [Implementing Lean Techniques to Increase the Efficiency of a Rural Primary Care Clinic: A Prospective Controlled Study](#) (Rambam Health Care Campus, Haifa, Israel)
- [Compensation Claims in Danish Emergency Care: Identifying Hot Spots and Blind Spots in the Quality of Care](#) (University Hospital Odense, Odense, Denmark)
- [The Impact of Palliative Medicine Consultation on Readmission Rates and Hospital Costs in Surgical Patients Requiring Prolonged Mechanical Ventilation](#) (University of Arkansas for Medical Sciences, Little Rock, Arkansas)
- [Improving Adherence to Risk Stratification Guidelines Regarding Venous Thromboembolism Prophylaxis](#) (Veterans Affairs Connecticut Healthcare System, West Haven, Connecticut)
- [Addressing the Nursing Shortage in the United States: An Interview with Dr. Peter Buerhaus](#) (commentary)

For more information, visit [The Joint Commission Journal on Quality and Patient Safety website](#).

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#### **Note for editors**

The article is “[Clinician Distress and Inappropriate Antibiotic Prescribing for Acute Respiratory Tract Infections: A Retrospective Cohort Study](#)” by Keri J.S. Brady, PhD, MPH; Tamar F. Barlam, MD; Mickey T. Trockel, MD, PhD; Pengsheng Ni MD, MPH; R. Christopher Sheldrick, PhD; Jeffrey I. Schneider, MD; Susannah G. Rowe, MD, MPH; and Lewis E. Kazis, ScD. The article appears in *The Joint Commission Journal on Quality and Patient Safety*, volume 48, number 5 (May 2022), published by Elsevier.

#### **The Joint Commission Journal on Quality and Patient Safety**

[The Joint Commission Journal on Quality and Patient Safety](#) (JQPS) is a peer-reviewed journal providing health care professionals with innovative thinking, strategies and practices in improving quality and safety in health care. JQPS is the official journal of [The Joint Commission](#) and [Joint Commission Resources, Inc.](#) Original case studies, program or project reports, reports of new methodologies or the new application of methodologies, research studies, and commentaries on issues and practices are all considered.