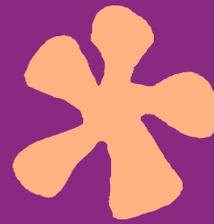


What is 'Antibiotic Resistance'?

Our body surfaces are normally covered with "resident" bacteria – all over, all the time, even when we're healthy. Every time we use an antibiotic, for any reason, by mouth or applied to the skin, we attack these resident bacteria – even when they are "minding their own business" and not causing our ailment. Not all of them just roll over and die. Some fight to survive, adapting to their new antibiotic environment. They make enzymes to survive. They make antibiotic resistant genes, and pass those genes on to bacteria that do make us sick, making them resistant, too.



Clearing up some confusion.

We doctors of internal medicine are also known as "internists."

This should not be confused with "interns," who are doctors in their first year of training after medical school.

Nor are we the same as "general practitioners" (GPs), or "family physicians" (FPs), whose practices may include surgery, obstetrics and pediatrics, and whose training is not solely concentrated on adults.

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INTERNAL MEDICINE
DOCTORS FOR ADULTSTM

Antibiotics: Do you really need them?



Not a cure-all,
overuse & misuse
make them less effective.

Half of antibiotic prescriptions are not needed.*

Viruses Most people who have a head cold, runny nose, cough, muscle aches, sore throat and even a fever have a virus. Viruses usually cause illness for 7-14 days and the symptoms can be treated with non-prescription medicines like decongestants, cold formulas and cough syrups. Antibiotics do not work against viruses – they only work against bacteria.

Bacteria Many serious illnesses such as pneumonia, meningitis, dysentery and blood poisoning are caused by bacteria. These illnesses can be life-threatening and can only be treated with antibiotics. If the bacteria are resistant, then it becomes very difficult – even impossible – to treat them.

Bacteria also cause more common ailments such as ear, urinary and sinus infections. An antibiotic may reduce the symptoms of these kinds of infections by a day or two. If symptoms are not serious and the risk of complications is low, then in most cases an antibiotic may not even be necessary because your body is capable of fighting it off.

*Centers for Disease Control and Prevention (CDC) estimate.



Overuse & Misuse.

Using antibiotics too much, too often, or not finishing a prescription reduces their effectiveness and can cause a problem called “antibiotic resistance.”

Overuse Half of the 100 million antibiotics prescribed a year in the U.S. are unnecessary. This overuse is causing antibiotics to become less effective when they are really needed.

Misuse People sometimes stop taking their antibiotics as soon as they begin to feel better – before finishing their prescription. This misuse also reduces the effectiveness of antibiotics.

You can help.

The good news: The incidence of antibiotic resistance can be dramatically reduced. America’s doctors of internal medicine (internists) urge you to help make it happen.

Here’s how:

- 1. Don’t insist** on antibiotics for yourself or your children.
- 2. Ask your doctor**, “Is this antibiotic really necessary?”
- 3. Take only with a doctor’s instructions** – don’t take antibiotics left over from old prescriptions, given to you by friends or family, or purchased abroad without a prescription.
- 4. Prevent infections** by washing hands thoroughly. Wash fruits and vegetables thoroughly. Avoid raw eggs and undercooked meats – especially ground meats.
- 5. Keep immunizations up-to-date** – especially for influenza and pneumonia if you are a senior citizen or have a chronic illness.
- 6. Finish each antibiotic prescription** – even if you feel better. If you don’t, some resistant bacteria may stay with you and multiply, requiring a different – likely stronger – antibiotic when the infection returns weeks later.