

Don't take antibiotics 'just in case' to prevent urinary tract infections in children: new advice

Antibiotics shouldn't be given to children as a preventative measure to try to avoid another urinary tract infection (UTI) for kids who have already had one infection, as it's unlikely to prevent another UTI and also contributes to the growing problem of antibiotic resistance.

This is the new advice from the Australian and New Zealand Society of Nephrology (ANZSN), developed through the Royal Australasian College of Physicians' (RACP) [Evolve program](#) and published as an official recommendation of the [Choosing Wisely Australia](#) initiative to reduce unnecessary healthcare – where the risks of using a medicine outweigh the potential benefits.

RACP spokesperson, ANZSN president and kidney specialist Dr Neil Boudville says “urinary tract infections are a common childhood infection, occurring in around 8% of girls and 2% of boys before 7 years of age.

“UTI symptoms can be unpleasant for the child and worrying for parents, so it's understandable that doctors and parents want to do whatever they can to prevent the child having to experience another infection once the first one has cleared up,” said Prof Boudville.

“But the evidence shows that, once the first infection has resolved, giving further antibiotics to your child 'just in case' they get another UTI is actually likely to do more harm than good.

“Not only are the 'just in case' antibiotics not likely to stop them from getting another UTI, but taking antibiotics when you don't really need them can contribute to antibiotic resistance, meaning antibiotics may not work for any future infection, whether a UTI or another type of infection,” he said.

Dr Robyn Lindner from the NPS MedicineWise Choosing Wisely Australia initiative says Choosing Wisely is about supporting people being more proactive in the management of their own healthcare or that of their kids or loved ones they are caring for.

“We strongly encourage people to ask their healthcare provider questions about any test, treatment or procedure, so they can make a more informed decision about their health management,” said Dr Lindner.

“Choosing Wisely has 5 questions to ask your doctor or healthcare provider to trigger the conversation, available at the [Choosing Wisely website](#),” she said.

The Choosing Wisely 5 questions are:

- Do I really need this test, treatment or procedure?
- What are the risks?
- Are there simpler, safer options?
- What happens if I do nothing?
- What are the costs?

[Choosing Wisely Australia](#), with forty-seven Australian medical colleges as members, is part of a global campaign encouraging a national conversation about reducing unnecessary tests, treatments and procedures.

Fifteen Australian medical colleges and organisations have collectively made [25 Choosing Wisely recommendations around the use of antibiotics](#).

These include recommendations around avoiding prescribing antibiotics for upper respiratory tract infections ([recommendation from the Australasian Society for Infectious Diseases](#)), avoiding repeat prescriptions of antibiotics without first checking if they are needed ([recommendation from the Pharmaceutical Society of Australia](#)) and starting antibiotics in general without an identified condition for which they can help. The length of the course of antibiotics should be determined beforehand or a review date planned ([recommendation from the Society of Hospital Pharmacists of Australia](#)).

See the NPS MedicineWise website for [more information on antibiotic resistance](#).

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