CAN QUICK CRP TEST BE HELPFUL WITH LOWERING ANTIBIOTICS THERAPY FREQUENCY IN CASES OF ACUTE RESPIRATORY TRACK INFECTIONS IN CHILDREN?

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Introduction:

One of the most common clinical problems in children at Primary Health Care are respiratory infections. Helpful proceedings in differentiating bacterial etiology from viral infection may be the result of a rapid test for the concentration of C-reactive protein (CRP) in capillary blood.

Aim:

The aim of the study was to determine whether the performance of a CRP test reduces the frequency of antibiotic therapy and whether it affects the effectiveness of management.

Material and methods:

The study included 395 cases of children aged 0-16 years in the period of 2015-2017 in 6 centers in Wroclaw and the surrounding area. In two examined centers, there was an access to CRP rapid test.

Results:

In the group of patients from centers with CRP Test device (n = 232), the test was performed in half of the cases (51.7%, n = 120). In the entire study group, the antibiotic was prescribed on the first visit in 26.3% of cases (n = 104), with a similar frequency in both types of clinics. The effectiveness of the procedure is comparable. As the expression of the effectiveness of the procedure, the most frequently observed is the lack of repeated visits within 7 days, more often in centers with access to CRP Test (84.8% against 68.7%), while in other centers, the follow-up visit is more frequent.

Conclusions:

CRP Test execution does not significantly alter the effectiveness of the procedure and the frequency of prescribed antibiotics, but it does reduces the frequency of control visits.