

Abstract ID = 8664

Presented at:

Recurrent lower respiratory illnesses among young children in rural Kyrgyzstan: Overuse of antibiotics. A qualitative FRESH AIR study

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Method: Semi-structured interviews were carried out in 2016 with 13 caregivers to under-fives with recurrent LRT-illnesses and were triangulated with 22 primary care health professional interviews in two rural provinces in Kyrgyzstan. Data was thematically analysed.

Results: The majority (8/13) of caregivers described their young children as having long-term or recurrent coughing, noisy breathing and respiratory distress, and several had responded positively to acute salbutamol and/or had been repeatedly hospitalized for LRT-illness. The caregivers had adapted a biomedical perception of their child's illness and called it mostly "a cold". They combined local traditional practices with rapid help-seeking. Family stress and financial burdens were significant. The rural health professionals classified young children with recurrent LRT-illnesses primarily with pneumonia and/or a multitude of bronchitis diagnoses. Broad-spectrum antibiotics and supportive medicine were used repeatedly, prescribed by health professionals or purchased un-prescribed by the caregivers at the pharmacy. The health professionals had never applied the asthma diagnosis to any under-fives, nor had they prescribed inhaled steroids, and none of the interviewed caregivers' under-fives were diagnosed with asthma. Health professionals and caregivers shared a common concern for the children's recurrent respiratory illnesses developing into a severe chronic pulmonary condition, including asthma.

Conclusions: This study identified inconsistent management of LRT-illnesses in under-fives, with massive over-use of antibiotics and an apparently systemic under-diagnosis of asthma/wheeze. When the diagnosis asthma/wheeze is not used, the illness is not considered as a long-term condition, requiring preventer/controller medication. Training in LRT-illness diagnoses and regulation of antibiotic sales in retail pharmacies should reduce Under-fives' morbidity.

Declaration of Interest

The authors declare no competing interests. The research has received support from the EU RIA program Horizon2020, grant-agreement no. 680997.