

World AMR Awareness Week

Consumer Quiz Answers

Question	Answer
<p>Question 1 Taking antibiotics when they aren't required can make future infections harder to treat.</p>	<p>Answer</p> <p>True</p> <p>When you take antibiotics when they are not required, this increases the chance of bacteria developing resistance to antibiotics. If these bacteria later cause infections that need to be treated, the antibiotics will not work properly.</p> <p>Reference Do I really need antibiotics? – Consumer Fact sheet https://www.safetyandquality.gov.au/publications-and-resources/resource-library/do-i-really-need-antibiotics</p>
<p>Question 2 Antibiotics only target bad bacteria that cause infections.</p>	<p>Answer</p> <p>False</p> <p>Antibiotics kill both harmful bacteria that make you sick and good bacteria that keep you healthy. Without these good bacteria, other types of germs can grow and cause infections.</p> <p>Reference Do I really need antibiotics? – Consumer Fact sheet https://www.safetyandquality.gov.au/publications-and-resources/resource-library/do-i-really-need-antibiotics</p>
<p>Question 3 Hundreds of people in Australia die from antibiotic-resistant infections each year.</p>	<p>Answer</p> <p>True</p> <p>Reference Do I really need antibiotics? – Consumer Fact sheet https://www.safetyandquality.gov.au/publications-and-resources/resource-library/do-i-really-need-antibiotics</p>
<p>Question 4 Only health care professionals (such as doctors, nurses and pharmacists) play a role in preventing the spread of antibiotic resistance.</p>	<p>Answer</p> <p>False</p> <p>Consumers and health care professionals can work together to prevent antibiotic resistance. If you have an infection and are prescribed an antibiotic, it is important to follow the instructions given to you by your clinician. Taking antibiotics correctly can reduce the risk of antibiotic resistance.</p>

	<p>Reference Do I really need antibiotics? – Consumer Fact sheet https://www.safetyandquality.gov.au/publications-and-resources/resource-library/do-i-really-need-antibiotics</p> <p>Information for consumers on antimicrobial resistance https://www.safetyandquality.gov.au/our-work/antimicrobial-resistance/antimicrobial-use-and-resistance-australia-aura/information-consumers-antimicrobial-resistance</p>
<p>Question 5 Antibiotics can treat colds, influenza and COVID-19.</p>	<p>Answer</p> <p>False</p> <p>Antibiotics do not treat infections caused by viruses.</p> <p>Reference Do I really need antibiotics? – Consumer Fact sheet https://www.safetyandquality.gov.au/publications-and-resources/resource-library/do-i-really-need-antibiotics</p>
<p>Question 6 When given a box or bottle of antibiotics, you must continue taking antibiotics until it has finished.</p>	<p>Answer</p> <p>False</p> <p>Antibiotics should be taken for the number of days specified by the prescriber. The pack sizes of antibiotics often don't match your prescribed duration, so there will often be leftovers. These should be returned to the pharmacy to be disposed of appropriately. The longer you are exposed to antibiotics, the more likely you are to pick up a resistant bacterium.</p> <p>Reference https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6736742/</p>
<p>Question 7 You can save leftover antibiotics and use them next time you get sick.</p>	<p>Answer</p> <p>False</p> <p>Different antibiotics work for different infections. It is important that you speak to your doctor before taking an antibiotic to make sure that you need antibiotics and are prescribed the correct one.</p> <p>Reference Do I really need antibiotics? – Consumer Fact sheet https://www.safetyandquality.gov.au/publications-and-resources/resource-library/do-i-really-need-antibiotics</p>
<p>Question 8 Antibiotic resistance is only a problem for people that overuse antibiotics.</p>	<p>Answer</p> <p>False</p> <p>Antibiotic resistance does not mean that you become resistant to the antibiotic, but the bacteria becomes resistant. These resistant bacteria can spread between</p>

	<p>people, animals and the environment.</p> <p>Reference How does AMR spread? https://www.amr.gov.au/about-amr/how-does-amr-spread</p>
<p>Question 9 All sore throats need antibiotics otherwise the infection will not go away.</p>	<p>Answer</p> <p>False</p> <p>Sore throats can get better usually in 2–7 days without taking antibiotics. Sore throats can be caused by bacteria and viruses. Antibiotics will not treat viruses.</p> <p>Reference Sore throat: should I take antibiotics? https://www.safetyandquality.gov.au/publications-and-resources/resource-library/sore-throat-should-i-take-antibiotics</p>
<p>Question 10 Getting vaccinated can help to reduce the spread of infections.</p>	<p>Answer</p> <p>True</p> <p>Vaccines help to train your body to recognise and fight germs that can cause infection without giving you the infection itself.</p> <p>Reference Antibiotic resistance and older people fact sheet https://www.safetyandquality.gov.au/sites/default/files/2022-11/antibiotic_resistance_and_older_people_factsheet.pdf</p>
<p>Question 11 Experiencing nausea after taking antibiotics is a sign that you are allergic to that antibiotic.</p>	<p>Answer</p> <p>False</p> <p>Nausea is a common side effect or adverse reaction for some antibiotics, not a sign of allergy, which usually shows up as a rash.</p> <p>Reference https://antibioticallergy.org.au/naan</p>
<p>Question 12 It is predicted that in 2050, 1.91 million people worldwide could die from antimicrobial resistance.</p>	<p>Answer</p> <p>True</p> <p>Reference Global burden of bacterial antimicrobial resistance 1990-2021: a systematic analysis with forecasts to 2050 https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01867-1/fulltext</p>

Clinician Quiz Answers

Question	Answer
<p>Question 1</p> <p>Antibiotics for surgical prophylaxis should be given for 72 hours post operation.</p>	<p>Answer</p> <p>False</p> <p>A single preoperative dose of antibiotic(s) is sufficient for a vast majority of procedures.</p> <p>Reference Therapeutic Guidelines https://www.tg.org.au/</p>
<p>Question 2</p> <p>All antibiotics dispensed in community pharmacies must have “until all finished” on the label.</p>	<p>Answer</p> <p>False</p> <p>The cautionary advisory label that is appropriate is Label D – “Take for (the number of) days as advised by your prescriber”.</p> <p>Reference Australian Pharmaceutical Formulary Handbook (APF) https://www.psa.org.au/media-publications/australian-pharmaceutical-formulary/</p>
<p>Question 3</p> <p>Shorter courses of antibiotics are often just as effective as longer courses of antibiotics for many infections.</p>	<p>Answer</p> <p>True</p> <p>45 randomised controlled trials have compared the efficacy of short-course versus traditional longer courses of antibiotic therapy for the treatment of common infections and have found no difference in efficacy between shorter and traditional courses of antibiotic therapy.</p> <p>Reference Duration of Antibiotic Therapy: Shorter Is Better https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6736742/</p>
<p>Question 4</p> <p><i>Escherichia coli</i> is the most common bacteria associated with urinary tract infections and bacteraemia in the community.</p>	<p>Answer</p> <p>True</p> <p>Reference Australian Passive AMR Surveillance: An update of resistance trends in multidrug-resistant organisms – 2006 to 2023 https://www.safetyandquality.gov.au/publications-and-resources/resource-library/australian-passive-amr-surveillance-update-resistance-trends-multidrug-resistant-organisms-2006-2023</p>

<p>Question 5</p> <p>Antimicrobial Stewardship programs are mandated in public and private hospitals in Australia.</p>	<p>Answer</p> <p>True</p> <p>Antimicrobial Stewardship is Action 3.18 and 3.19 of the Preventing and Controlling Infections Standard.</p> <p>Reference Preventing and Controlling Infections Standard https://www.safetyandquality.gov.au/standards/nsqhs-standards/preventing-and-controlling-infections-standard</p>
<p>Question 6</p> <p>Endemic infectious disease and novel disease outbreaks may worsen as shifts in climate create favourable conditions for disease vectors and pathogens to proliferate.</p>	<p>Answer</p> <p>True</p> <p>Reference Climate change, its impact on emerging infectious diseases and new technologies to combat the challenge https://www.tandfonline.com/doi/full/10.1080/22221751.2024.2356143</p>
<p>Question 7</p> <p>The total number of carbapenemase-producing <i>Enterobacterales</i> (CPE) has increased by 45% from 2022 to 2023.</p>	<p>Answer</p> <p>True</p> <p>Compared to 2022, there was a 45.4% increase in overall reports of CPE in 2023 with the greatest increase seen in Victoria and NSW.</p> <p>Reference CARAlert annual report https://www.safetyandquality.gov.au/publications-and-resources/resource-library/caralert-annual-report-2023</p>
<p>Question 8</p> <p>Antimicrobial prescriptions supplied under the PBS and RPBS have steadily increased since 2015.</p>	<p>Answer</p> <p>False</p> <p>Since 2015, there has been a downward trend in overall antimicrobial use in the community. There was a gradual overall decline of 8.9% from 2015 to 2019. This was followed by a more dramatic decline of 24.6% from 2019 to 2020, which was sustained in 2021. Antimicrobial use increased slightly from 2021 to 2022 (up 9.6%) and remained steady into 2023 (up 1.3%). Antimicrobial use in 2023 is 24.4% lower than 2015.</p> <p>Reference Antimicrobial use in the community: 2023 https://www.safetyandquality.gov.au/publications-and-resources/resource-library/antimicrobial-use-community-2023</p>
<p>Question 9</p>	<p>Answer</p>

<p>You have to take antibiotics to be at risk of developing an antibiotic-resistant infection.</p>	<p>False. People can acquire resistant bacteria without prior antibiotic exposure.</p> <p>Reference https://pubmed.ncbi.nlm.nih.gov/21881561/ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6850694/</p>
<p>Question 10</p> <p><i>Escherichia coli</i> is a gram-negative bacillus and the most common cause of urinary tract infections. Resistance to amoxicillin is common, and some isolates may produce extended-spectrum beta-lactamases.</p>	<p>Answer</p> <p>True</p> <p>Reference <i>Escherichia coli</i> Infection https://www.ncbi.nlm.nih.gov/books/NBK564298/</p> <p>Antibiotic Resistance Pattern of Extended Spectrum Beta Lactamase Producing <i>Escherichia coli</i> Isolated From Patients With Urinary Tract Infection in Morocco https://pubmed.ncbi.nlm.nih.gov/34490146/</p>
<p>Question 11</p> <p>Group A streptococcus only causes mild infections and is not associated with severe disease.</p>	<p>Answer</p> <p>False</p> <p>Group A streptococcus can cause severe life-threatening infections known as invasive group A streptococcal disease. Two of the most severe forms are necrotising fasciitis and streptococcal toxic shock syndrome.</p> <p>Reference Group A streptococcal disease – invasive (iGAS) https://www.health.gov.au/diseases/group-a-streptococcal-disease-invasive-igas</p>
<p>Question 12</p> <p>It is not safe to give a patient who experienced a full body rash to amoxicillin 5 years ago, (with no facial involvement, resolved with topical corticosteroids) cefazolin.</p>	<p>Answer</p> <p>False</p> <p>Reference Therapeutic Guidelines – Cross-reactivity between beta-lactams https://www.tg.org.au/ https://www.jaci-inpractice.org/article/S2213-2198%2817%2930501-9/pdf</p>

More information

Get behind World AMR Awareness Week efforts in your health service. Use the Commission's resources on the [Resources for World AMR Awareness Week](#) webpage.

Visit <https://www.safetyandquality.gov.au/our-work/antimicrobial-stewardship> or email AMS@safetyandquality.gov.au



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