Significant reduction of antibiotic use in the community after a nationwide campaign in France, 2002-2007.

**Images**

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[Anti-Bacterial Agents](javascript:__doLinkPostBack('','ss~~MM%20%22Anti-Bacterial%20Agents%22%7C%7Csl~~rl','');)/[\*therapeutic use](javascript:__doLinkPostBack('','ss~~MM%20%22Anti-Bacterial%20Agents%20therapeutic%20use%22%7C%7Csl~~rl','');)   
[Drug Prescriptions](javascript:__doLinkPostBack('','ss~~MM%20%22Drug%20Prescriptions%22%7C%7Csl~~rl','');)/[\*statistics & numerical data](javascript:__doLinkPostBack('','ss~~MM%20%22Drug%20Prescriptions%20statistics%20%26%20numerical%20data%22%7C%7Csl~~rl','');)   
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[Influenza, Human](javascript:__doLinkPostBack('','ss~~MM%20%22Influenza%2C%20Human%22%7C%7Csl~~rl','');)/[\*drug therapy](javascript:__doLinkPostBack('','ss~~MM%20%22Influenza%2C%20Human%20drug%20therapy%22%7C%7Csl~~rl','');)   
[Practice Patterns, Physicians'](javascript:__doLinkPostBack('','ss~~MM%20%22Practice%20Patterns%2C%20Physicians%5C%27%22%7C%7Csl~~rl','');)/[\*trends](javascript:__doLinkPostBack('','ss~~MM%20%22Practice%20Patterns%2C%20Physicians%5C%27%20trends%22%7C%7Csl~~rl','');)  
[Adolescent](javascript:__doLinkPostBack('','ss~~MH%20%22Adolescent%22%7C%7Csl~~rl','');) ; [Age Distribution](javascript:__doLinkPostBack('','ss~~MH%20%22Age%20Distribution%22%7C%7Csl~~rl','');) ; [Child](javascript:__doLinkPostBack('','ss~~MH%20%22Child%22%7C%7Csl~~rl','');) ; [France](javascript:__doLinkPostBack('','ss~~MH%20%22France%22%7C%7Csl~~rl','');) ; [Health Policy](javascript:__doLinkPostBack('','ss~~MH%20%22Health%20Policy%22%7C%7Csl~~rl','');) ; [Humans](javascript:__doLinkPostBack('','ss~~MH%20%22Humans%22%7C%7Csl~~rl','');); [Program Evaluation](javascript:__doLinkPostBack('','ss~~MH%20%22Program%20Evaluation%22%7C%7Csl~~rl','');) ; [Public Health](javascript:__doLinkPostBack('','ss~~MH%20%22Public%20Health%22%7C%7Csl~~rl','');)

**Abstract:**

**Background:**Overuse of antibiotics is the main force driving the emergence and dissemination of bacterial resistance in the community. France consumes more antibiotics and has the highest rate of beta-lactam resistance in Streptococcus pneumoniae than any other European country. In 2001, the government initiated "Keep Antibiotics Working"; the program's main component was a campaign entitled "Les antibiotiquesc'est pas automatique" ("Antibiotics are not automatic") launched in 2002. We report the evaluation of this campaign by analyzing the evolution of outpatient antibiotic use in France 2000-2007, according to therapeutic class and geographic and age-group patterns.  
**Methods and Findings:**This evaluation is based on 2000-2007 data, including 453,407,458 individual reimbursement data records and incidence of flu-like syndromes (FLSs). Data were obtained from the computerized French National Health Insurance database and provided by the French Sentinel Network. As compared to the preintervention period (2000-2002), the total number of antibiotic prescriptions per 100 inhabitants, adjusted for FLS frequency during the winter season, changed by -26.5% (95% confidence interval [CI] -33.5% to -19.6%) over 5 years. The decline occurred in all 22 regions of France and affected all antibiotic therapeutic classes except quinolones. The greatest decrease, -35.8% (95% CI -48.3% to -23.2%), was observed among young children aged 6-15 years. A significant change of -45% in the relationship between the incidence of flu-like syndromes and antibiotic prescriptions was observed.  
**Conclusions:**The French national campaign was associated with a marked reduction of unnecessary antibiotic prescriptions, particularly in children. This study provides a useful method for assessing public-health strategies designed to reduce antibiotic use.

**Comments:**

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**Substance Nomenclature:**

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