

Design of a clinical study to demonstrate the value of diagnostics

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Why?

- Diagnostics empower healthcare professionals to make targeted treatment decisions sooner with diagnostics – thereby reducing inappropriate antimicrobial use and the spread of resistance.
- Research indicates that countries' antibiotic-prescribing rates are linked to resistance rates and, consequently, that the reduction of unnecessary prescribing, particularly for acute respiratory tract infections (ARTIs), could directly contribute to lower resistance.
- However, the value of diagnostics as a critical component of Antimicrobial Stewardship is not fully established throughout Europe, with guidelines, funding and policy varying in each country

Objective

- Design and implement a clinical study to demonstrate the value of currently available diagnostics in the optimal management of community acquired – acute respiratory tract infections (CA-ARTIs), by using the Standardized Care Network



- Provide the evidence to support the uptake of currently available and new diagnostics in guiding antimicrobial prescribing in primary care/community

Study Overview

- Primarily evaluate the impact of the use of rapid diagnostics in relation to their impact on Antimicrobial prescribing rates
- Evaluate the defined measurable clinical outcome and success parameters (clinical utility) which will be determined at start of project
- Include combinations of “host-based” and “pathogen-based” diagnostic tests
- Evaluate and test the implementation process for new devices (change management and sustainability) as derived from WP1
- Include parameters to evaluate the health economic model(s) as determined at start of project