Adherence to Acute Otitis Media Diagnosis and Treatment Guidelines Among Israeli Otolaryngologists

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The recent Israeli acute otitis media (AOM) guidelines, addressed diagnostic and therapeutic issues, in order to reduce over-diagnosis and treatment.

While the adherence rate of pediatricians to previous guidelines (2004) was high (>85%), the compliance of otolaryngologists has not been studied. We show a moderate adherence rate, suggesting that these guidelines were partially adopted by otolaryngologists, who use different instrumentation and treat more severe/complicated cases.

Over-treatment with antibiotics and inaccurate dosing regimens are still common. Better implementation of the AOM guidelines should be performed in designated training platforms.

Introduction

• Acute otitis media (AOM) is a common childhood disease. The recent Israeli AOM guidelines (2013) addressed diagnostic and therapeutic issues, in order to reduce over-diagnosis and treatment.

• Adherence rate of pediatricians to previous Israeli AOM guidelines (2004) was reported to be high (>85%).

Study Aims

• We evaluated the otolaryngologists' compliance with the Israeli and the U.S. recent AOM guidelines, and examined the differences between specialists and residents.

Methods

• An anonymous 19-item questionnaire was circulated among practicing Israeli otolaryngologists: residents [n=93], specialists [n=283]. Response rate was 34% (n=127).

• All items were scored according to the number of correct answers in line with the guidelines, and summed on a 0-100 scale.

Results

• Overall, scores of residents (n=48, 38%) and specialists (n=79, 62%) were similar, and showed comparable moderate adherence to both guidelines: 55.7 vs 58.3 (p=0.26).

• Residents were more likely to adhere to the U.S. guidelines, when compared to specialists (score difference 6.1 vs 2.8, p=0.008).

Discussion

• Clinical practice guidelines implementation may be difficult, pointing out the gap between the daily practices and the guidelines recommendations.

• The need of patient care standardization in AOM is particularly important, due to its high prevalence among the pediatric population.

• Several explanations for the moderate adherence rates in Israel are:
  - 1) Limited distribution of the local guidelines.
  - 2) The content of the guidelines is complex.
  - 3) Medical education activities are based on English publications, which results from a higher exposure to the U.S. guidelines.
  - 4) Otolaryngologists treat “selected” cases, which require a more patient-oriented approach.

Future research is needed to validate the applicability of AOM guidelines to the population of the relevant physicians: Pediatricians, GPs, Family physicians and Otolaryngologists.