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Theoretical approaches in the development and evaluation of behaviour change interventions that improve clinicians' antimicrobial prescribing: a systematic review Hend Talkhan¹, Prof Derek Stewart¹, Dr Trudi McIntosh¹, Prof Moza Al Hail², Dr Pallivalappila Abdulrouf², Dr Hisham Ziglam², Dr Scott Cunningham¹ ¹Robert Gordon University, Aberdeen, UK; ²Hamad Medical Corporation, Doha, Qatar

Background

- Many countries have developed antimicrobial stewardship (AMS) programmes i.e. interventions designed to improve antimicrobial prescribing/utilisation, minimise antimicrobial resistance and improve patient outcomes.
- There remains a need for theoretically based interventions to improve clinicians' antimicrobial prescribing.

Results

- Ten studies met the inclusion criteria and were included in the systematic review (Figure 3).
- There was no optimal use of theory as recommended in the TCS.
- Most studies employed quantitative designs (n = 4), with fewer qualitative designs (n = 3). The remaining three studies employed mixed-methods designs.
- Most of the studies included were conducted in the UK (n = 8), with one study each in Canada and Sweden.

Review aim

 To systematically review, critically appraise, synthesise and present the existing evidence for theoretical approaches in the development and evaluation of behaviour change interventions that improve clinicians' antimicrobial prescribing.

- The majority of studies were carried out in primary care settings (n = 9), targeting respiratory tract infections (n = 8).
- The main groups targeted were medical doctors (n = 10) and nurses (n = 4).
- Theoretical approaches used to inform the design and choice of intervention varied across studies.

Methods

- The review protocol was developed and registered with the International Prospective Register of Systematic Reviews¹.
- Databases were searched from inception to October 2018 for published, peer-reviewed studies investigating theoretically based behaviour change interventions designed to improve clinicians' antimicrobial prescribing (Figure 1).
- Study selection, quality assessment and data extraction were conducted independently by two reviewers.
- The Theory Coding Scheme (TCS) was used to evaluate the extent of theory use².
- A narrative approach to data synthesis was undertaken, in relation to the UK Medical Research Council (MRC) Framework (Figure 2)³.





Figure 1. Key characteristics of the systematic review

The UK MRC Framework

Figure 3. PRISMA flow chart presenting the study selection process

Conclusion

- This systematic review is the first to investigate theoretically based behaviour change interventions that improve clinicians' antimicrobial prescribing.
- Few studies involving theory in intervention development and evaluation were identified, none was from the Middle East.



Figure 2. Key phases of developing and evaluating complex interventions³

There is a need for better quality, primary research in this area.
The review findings will help inform the development and evaluation of future theoretically based AMS interventions.

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