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# Role of multidimensional factors in the diagnosis and treatment of tonsillopharyngitis in primary care: a qualitative study

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## Abstract

**Background:** Tonsillopharyngitis is one of the most frequently observed upper respiratory tract infections, for which antibiotics are prescribed in ambulatory care. In most cases, tonsillopharyngitis is benign and self-limiting, mostly a viral condition. The aim of this study was to explore the diagnostic and treatment process of tonsillopharyngitis by general practitioners and to understand decisions regarding antibiotic prescribing and the factors that shape these practices.

**Methods/design:** This was a qualitative interview study in primary care practices in Latvia. Semi-structured face-to-face interviews were conducted with general practitioners from November 2016 to January 2017. Thematic analysis was applied to identify factors that influence the prescribing practice in a primary care setting in conjunction with a specific context in which the prescriber practices.

**Results:** Decisions and practice of general practitioner are not static over time or context; they occur within an environmental setting influenced by individual factors of general practitioners, the health care system, and practice-specific factors that shape the diagnosis and antibiotic prescribing in the tonsillopharyngitis. Interviewed general practitioners rely primarily on their personal experience, perception, and skills acquired in their practice, which are encouraged by the environment, where the necessary tools and resources are not in place to encourage rational prescribing of antibiotics.

**Conclusions:** General practitioners' decision regarding antibiotic prescribing is an unstable concept that differs between prescribers. The health care system could augment the experience of general practitioners through structural changes such as guidelines, availability of antibiotics, and available antibiotics package size.

**Keywords:** Tonsillopharyngitis, General Practitioners, Qualitative Study, Decision-Making Process

## Background

Tonsillopharyngitis (TF) is a frequently observed condition with symptoms of pharynx inflammation. In

most cases, TF is a benign, self-limiting, and viral condition (40–80%). Bacterial causes include group A beta-haemolytic streptococci (GABHS) (15–30%) and group C beta-haemolytic streptococci (5%) [1–3]. Symptoms of bacterial and viral TF can last around one week, but most patients improve without antibiotics (ABs), regardless of the cause [4].

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