

EUROPEAN ANTIBIOTIC AWARENESS DAY
18 November 2009

Toolkit for engaging with Primary Care Prescribers

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1 Introduction

Welcome to the European Antibiotic Awareness Day Toolkit for Primary Care Prescribers prepared by the European Centre for Disease Prevention and Control (ECDC). The aim of this toolkit is to assist European public health authorities in preparing campaign materials targeting primary care prescribers for the second annual European Antibiotic Awareness Day – 18 November 2009.

Concerted long-term efforts on awareness and appropriate use of antibiotics are key to turning the tide of antibiotic resistance. The success of national awareness campaigns on prudent antibiotic use in some EU countries stimulated a European public health initiative coordinated by ECDC and named European Antibiotic Awareness Day to take place each year on 18 November.

The overall objective of European Antibiotic Awareness Day is to support national activities aimed at raising awareness of prudent antibiotic use among the general public as well as particular target audiences such as primary care prescribers, so as to maintain the efficacy of antibiotics and slow down the emergence and spread of resistant bacteria.

This note has been written to present the toolkit to the National AMR Focal Points and provide advice on how best to approach primary care prescribers and how to adapt the toolkit materials for use at national level.

1.1 Overall strategy and objective of the toolkit

The toolkit offers advice on how national public health authorities could engage with primary care prescribers so as to promote appropriate and responsible use of antibiotics. The toolkit contains template materials and some suggested key messages for health professionals, ideas for awareness raising activities, and suggested tactics for getting the messages across to both primary care providers and patients regarding prudent use of antibiotics.

More information about the European Antibiotic Awareness Day is available on the European Antibiotic Awareness Day website <http://antibiotic.ecdc.europa.eu/>.

1.2 Contents of the toolkit

The toolkit includes materials described below. These materials are provided in electronic format to National AMR Focal Points and will be made available on the new EAAD website. These materials will be described in more detail in the following sections.

- Key messages for primary care prescribers;
- Template letter to primary care prescribers;
- Template fact sheet on antibiotic resistance;
- Template patient leaflet;
- Template patient dialogue.

These documents all reference the relevant scientific literature, a list of which is also provided as an Annex to this note.

2 Strategy and approach

2.1 About the target audience

The primary target audience of the 2009 European Antibiotic Awareness Day are primary care prescribers as they represent the group that most frequently interacts with patients seeking medical advice due to simple viral infections, such as common colds and flu. Primary care prescribers generally consist of general practitioners but in some countries also include nurses who can provide primary care and write prescriptions for patients.

Primary care accounts for a large number of antibiotic prescriptions for respiratory tract infections – 80-90% of all antibiotic prescriptions for this indication according to various sources – of which a significant proportion are unnecessary. In an effort to decrease the number of unnecessary antibiotic prescriptions, the European Antibiotic Awareness Day campaign in 2009 will target this prime source of prescriptions in order to raise awareness about antibiotic resistance among health professionals and facilitate the dissemination of this information among primary care patients.

The main aim of the 2009 campaign is to encourage and empower primary care prescribers to follow prescription guidelines for antibiotics and to provide them with the necessary information, messages and tools to inform patients about the risks of antibiotic resistance and direct their patients towards appropriate use of antibiotics and alternative treatments for viral infections such as common colds and flu.

2.2 Strategy and approach to primary care prescribers in 2009

Due to the complexity of the target audience and their unique position as a key influencer of patients' behaviour, ECDC has adopted a strategy based on securing endorsement of the campaign, key messages and materials by primary care prescribers' representative organisations.

The toolkit materials have been developed in close consultation with the National AMR Focal Points, the Technical Advisory Committee, stakeholder representatives, health professionals and patients' organisations. The wide consultation process aimed to provide a thorough understanding of the challenges faced by primary care prescribers with regard to antibiotic prescribing and dispensing.

The table below outlines the consecutive phases of consultation in developing the toolkit.

| Feedback deadlines | Subsequent Activities |
|---|------------------------------|
| <ul style="list-style-type: none"> - Draft first ideas on target audience - Draft first ideas on strategy and approach - Draft first ideas on toolkit contents | |
| 11-12 February, Technical Advisory Committee meeting | |

| | |
|---|--|
| <p>Discussion on</p> <ul style="list-style-type: none"> - Choice of target audience - Initial ideas on approach & strategy - Initial ideas on materials | <ul style="list-style-type: none"> - First draft of key messages - Draft toolkit structure - Develop approach and strategy |
| 17-18 March 2009 – Champ Group meeting | |
| <p>Informal feedback on</p> <ul style="list-style-type: none"> - Approach & strategy - First key messages | <ul style="list-style-type: none"> - Develop draft key messages - Develop concepts for materials - Draft letter to primary care professionals - Develop first draft of format and additional tools (other than core) |
| 14-16 April, Focal Points Meeting, Prague | |
| <p>Feedback from Focal Points on</p> <ul style="list-style-type: none"> - Approach & strategy - Draft content - Format and additional tools - Draft key messages | <ul style="list-style-type: none"> - Incorporate feedback into drafts - Amend key messages - Draft patient dialogue structure - Draft brochure for primary care prescribers - Amend and develop draft letter |
| 8 May, brainstorm with the Standing Committee of European Doctors (CPME), Brussels | |
| <p>Feedback on</p> <ul style="list-style-type: none"> - Approach & strategy - Content and format - Key messages | <ul style="list-style-type: none"> - Incorporate feedback into drafts - Amend key messages - Amend brochure for primary care prescribers - Develop first draft of patient leaflet - Amend patient dialogue into a flowchart - Amend letter |
| 12 June, TAC meeting, Stockholm | |
| <p>Feedback on:</p> <ul style="list-style-type: none"> - key messages - toolkit materials | <ul style="list-style-type: none"> - Gather feedback and incorporate into drafts |
| June 2009, e-mail consultation with WONCA Europe | |
| <p>Feedback on toolkit materials</p> | <ul style="list-style-type: none"> - Gather feedback from WONCA members |
| 12 June, CPME Annual Meeting, Brussels | |
| <p>Feedback on toolkit materials</p> | <ul style="list-style-type: none"> - Gather feedback from CPME member organisations and UEMO (European Union of General Practitioners) |
| 22-23 June, meetings with stakeholders in Brussels | |
| <p>Presentation of draft materials to:</p> <ul style="list-style-type: none"> - European Federation of Nurses (EFN) - Pharmaceutical group of the European Union (PGEU) - European Patients' Forum (EPF) - European Public Health Alliance (EPHA) - European Respiratory Society (ERS) - European Generics Association (EGA) - European Federation of Pharmaceutical Industry Associations (EFPIA) | <ul style="list-style-type: none"> - Compile all the feedback received from all stakeholders - Amend all toolkit contents on the basis of the feedback received - Finalise draft materials and design files |



2.3 Working with representative organisations of health professionals at national level

Following the consultation process with representative organisations of medical professionals, the toolkit materials have received endorsement from these organisations:

- CPME, the Standing Committee of European Doctors, www.cpme.eu
- UEMO, the European Union of General Practitioners, www.uemo.org
- WONCA Europe, the regional branch of the World Organisation of Family Doctors, www.woncaeurope.org
- PGEU, the Pharmaceutical Group of the European Union, www.pgeu.eu

Two of these organisations, PGEU and WONCA Europe, have provided ECDC with full lists of their member organisations in the EU member states and associate countries. These are available in Annex 2 and 3 (*please note that these details were provided by PGEU and WONCA respectively and ECDC does not take responsibility for any inaccuracies encountered in the documents*). For the other two organisations, information about their membership is available at the following web links:

- http://www.cpme.be/content.php?c=aboutcpme_members (for CPME) and
- <http://www.uemo.org/natsec/index.htm> (for UEMO).

Given the EU-level endorsement of the campaign and the tools by these organisations, we recommend that national Focal Points approach the national members of these organisations to gain endorsement at the national level, in order to make this support more recognisable to primary care prescribers.



3 *Using the toolkit materials*

3.1 General remarks

The toolkit materials are provided in an adaptable format (Word, Adobe InDesign) for easy adaptation, translation and use at national level. In addition to this toolkit, it is recommended to continue to use the supporting visuals developed in 2008, such as the hedgehog and scarf, throughout the campaign to consolidate the initiative and continue to ensure a common visual identity for the campaigns across the EU member states. This aims to make sure messages are recognisable and consistent, and therefore memorable, to the target audience throughout the EU.

To ensure maximum outreach and resonance with the target audience of primary care prescribers, each member state may of course choose to adapt the 2009 toolkit materials. All materials have been drafted in a format designed to facilitate adaptation, duplication and dissemination and limit the costs of production. The materials share a common general look and all carry the ECDC and EAAD logos, to which logos of national authorities can be added to add weight and show support for the campaign.

At the same time, these materials will be made available on the campaign website at <http://antibiotic.ecdc.europa.eu>, which will provide a resource for information and materials in a multilingual format for the target audience as well as for the general public.

3.2 Key messages

The overall aim of European Antibiotic Awareness Day in 2009 is to increase awareness among primary care prescribers about antibiotic resistance and the way they can contribute to keeping antibiotics effective. The key messages of the campaign in 2009 are therefore specifically tailored to meet this objective. On this basis, the key messages have been devised to relate to primary care prescribers and promote the dissemination of the key messages to the general public.

The overall theme of the key messages remains the same as in the 2008 campaign: **'stop the unnecessary use of antibiotics'**. The 2009 key messages for primary care prescribers are built on the key messages of the 2008 campaign and emphasize in particular the responsibility of primary care prescribers in keeping antibiotics effective. The messages also rely on a considerable amount of scientific literature which is referenced, as this is a way of relating to health professionals which has proven to be effective and will encourage them to seek further reading and information sources.

The key messages are build around three main themes: the first emphasizes the rising tide in antibiotic resistance (why it is important to take action); the second emphasizes the main way in which to stop the increase of antibiotic resistance (what primary care prescribers can do to contribute); the third highlights that communications with patients are effective in promoting appropriate use of antibiotics (how to encourage appropriate use of antibiotics).

Below is a detailed overview of the key messages to primary care prescribers:

1. Growing antibiotic resistance threatens the effectiveness of antibiotics now and in the future

- Antibiotic resistance is an increasingly serious public health problem in Europe.
- A direct link exists between the current misuse of antibiotics and the rise of antibiotic resistance.
- Antibiotics are losing their effectiveness at a pace that was unforeseen even five years ago. This is because antibiotic use causes bacteria to become resistant to antibiotic treatments.
- While the number of infections due to antibiotic-resistant bacteria is growing, the pipeline of new antibiotics is unpromising, thus presenting a bleak outlook on availability of effective antibiotic treatment in the future.
- Primary care accounts for 80-90% of all antibiotic prescriptions.
- If we continue to consume antibiotics at the current rate, Europe may face a return to the pre-antibiotic era where a common bacterial infection could be a death sentence. So when one would need antibiotics in the future they may no longer work.

This key message is factual as it presents facts and figures on the growing resistance to antibiotics and the expected impact on public health if current trends continue. It frames the issue of antibiotic resistance in a wider context and emphasizes that this is a public health problem that can only be tackled through concerted efforts. This presentation of the current status of antibiotic resistance and its main causes invites primary care prescribers to reflect on their responsibility for this trend and consider ways in which they could contribute to stemming the tide of antibiotic resistance.

2. Rising levels of antibiotic resistant bacteria could be curbed by encouraging limited and appropriate antibiotic use in primary care patients

- Antibiotic exposure is linked to the emergence of antibiotic resistance.
- Primary care prescribers have to take responsibility for promoting appropriate use of antibiotics in order to keep antibiotics effective.
- Only prescribe antibiotics when necessary.
- Base antibiotic prescriptions on a symptomatic diagnosis and not on patient pressure.
- Use your status as an authoritative source of information to advise primary care patients on the risks of inappropriate antibiotic use.

This key message builds on facts and evidence on antibiotic resistance and its strong correlation with primary care, thus emphasizing the role of primary care prescribers in reducing unnecessary antibiotic prescriptions and use. It also points out the responsibility of primary care prescribers to educate patients on the correct use of antibiotics and explain the risks of inappropriate antibiotic use. It also recognizes that primary care prescribers in some cases feel patient pressure for antibiotics and calls on them to resist such pressure, instead basing their prescribing decisions on their professional assessment of a patient's condition.

3. Communicating with patients is key

- Communicate antibiotic awareness to patients: antibiotics are effective only against bacterial infections and not viral infections such as common colds or influenza (flu).
- Provide information on antibiotic treatment and antibiotic resistance but also alternative treatments.
- Ensure that patients understand and agree the proposed treatment.
- Offering alternatives to antibiotic prescriptions does not mean longer consultations.
- Give instructions on appropriate use of antibiotics if prescribed.
- Professional medical advice impacts patients' perceptions and attitudes towards their illness and perceived need for antibiotics, in particular when the expected course of illness is explained, including the recovery time and self-management strategies.

This message highlights the need for primary care prescribers to use their status as authoritative sources of information in order to communicate with patients on the proper use of antibiotics. It underlines that professional medical advice considerably impacts patients' perceptions towards the treatment of their illness and that communications techniques have been developed that allow for patients to be educated about antibiotic resistance while being denied antibiotic prescriptions when they are not needed. It also highlights that patient satisfaction depends more on effective communication than on receiving a prescription.

Together, the three key messages and their sub-messages provide a top-line explanation of the why, what and how of primary care prescribers' contribution to reducing antibiotic resistance. Based on stakeholder feedback, the messages build on primary care prescribers' understanding of the risk of antimicrobial resistance and intend to be primarily persuasive rather than prescriptive, while being powerful and prompting actions by primary care prescribers in relation to patients.

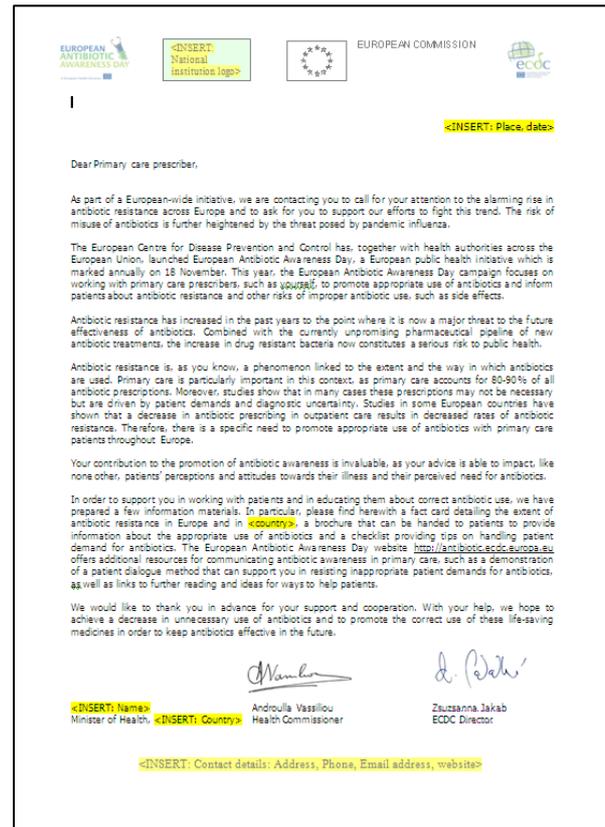
The key messages are the basis of the toolkit materials and should be used when developing any additional materials targeted at health professionals.

3.3 Template letter to primary care prescribers

A template letter has been drafted for national public health authorities to send to primary care prescribers to introduce European Antibiotic Awareness Day. The letter will be signed by the EU Health Commissioner Androulla Vassiliou and the ECDC Director Zsuzsanna Jakab and carries the ECDC and EAAD logos. It will be provided in Word format which allows for the addition of the logo of national health authorities and the signature of the national health minister where appropriate.

This letter can be translated and adapted to include relevant national details, then sent to primary care prescribers as an introduction of the European Antibiotic Awareness Day initiative and a call for their participation in this initiative. The letter explains the extent of AMR and provides related facts and figures. Furthermore, the letter calls for attention to the alarming rise in antibiotic resistance across Europe. The letter asks primary care prescribers for their support to fight this negative trend and promotes the European Antibiotic Awareness Day website as a useful resource for communicating antibiotic awareness in primary care.

The letter should accompany materials for the use of primary care prescribers such as the fact sheet and flowchart, as well as the patient leaflet which primary care prescribers can hand out to patients. Other materials developed at the national level which can be used by primary care prescribers can also be included (e.g. gimmicks, posters etc).



3.4 Fact sheet for primary care prescribers

A fact sheet on antibiotic resistance in primary care has been developed to provide primary care prescribers with EU and national data on the latest trends. Awareness of these facts and figures among primary care prescribers should provide them with the “why” of avoiding unnecessary antibiotic prescriptions and resisting inappropriate patient pressure for antibiotics when they are not needed.



Antibiotic Resistance

– facts and figures

Fact #1
Antibiotic resistance is an increasingly serious public health problem in Europe [1, 2]. Resistance to antibiotics is often high and increasing. In many countries, resistance rates have more than doubled in the past five years.

Growing antibiotic resistance threatens the effectiveness of antibiotics now and in the future.

Fact #2
Antibiotic exposure leads to emergence of antibiotic resistance [4]. The overall uptake of antibiotics in a population, as well as how antibiotics are consumed, has an impact on antibiotic resistance [5, 6].

Fact #3
3. Antibiotic prescribing and consumption varies between European countries [7, 8]. Primary care accounts for about 60 to 90% of all antibiotic prescriptions, mainly for respiratory tract infections [9, 9].

Fact #4
Communicating with patients is key. Professional medical advice impacts patients' perceptions and attitude towards their illness and perceived need for antibiotics.

Studies show that patient satisfaction in primary care settings depends more on effective communication than on receiving an antibiotic prescription [10-12] and that prescribing an antibiotic for an upper respiratory tract infection does not decrease the rate of subsequent return visits [13].

Professional medical advice impacts patients' perceptions and attitude towards their illness and perceived need for antibiotics, in particular when they are advised on what to expect in the course of the illness, including the realistic recovery time and self-management strategies [14].

Primary care prescribers do not need to allocate more time for consultations that involve offering alternatives to antibiotic prescribing. Studies show that this can be done within the same average consultation time while maintaining a high degree of patient satisfaction [8, 15, 16].

References

[1] European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2007. European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2007. http://ecdc.europa.eu/en/files/document/data/earss_07.pdf

[2] European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2008. European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2008. http://ecdc.europa.eu/en/files/document/data/earss_08.pdf

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[4] European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2010. European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2010. http://ecdc.europa.eu/en/files/document/data/earss_10.pdf

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[12] European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2007. European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2007. http://ecdc.europa.eu/en/files/document/data/earss_07.pdf

[13] European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2007. European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2007. http://ecdc.europa.eu/en/files/document/data/earss_07.pdf

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Antibiotic Resistance

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Primary care prescribers do not need to allocate more time for consultations that involve offering alternatives to antibiotic prescribing. Studies show that this can be done within the same average consultation time while maintaining a high degree of patient satisfaction [8, 15, 16].

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[16] European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2007. European Antibiotic Resistance Surveillance System (EARSS) Annual Report 2007. http://ecdc.europa.eu/en/files/document/data/earss_07.pdf

The fact sheet aims to provide information to prescribers and direct them to studies and reports, in order to encourage them to take action on a voluntary basis. The fact sheet builds on several points in the key messages and emphasizes the following issues:

- Rising levels of antibiotic resistance
- The link between antibiotic use and antibiotic resistance
- The weight of primary care in overall antibiotic prescriptions and the large differences among countries in this respect
- Types of interventions by primary care prescribers proven effective in relevant literature

The fact sheet is provided in Adobe InDesign format, allowing for its translation and adaptation to national situations (e.g. inserting country-specific data, graphs, figures). The fact sheet carries the ECDC and EAAD logos and can be adapted for national use by inserting the logo of the national authority and national contacts.

A version of the fact sheet is also provided in Word format which carries embodied tables containing the national data for Figure 1 and 2. In order to obtain the relevant national data in Figure 1, the following steps need to be followed:

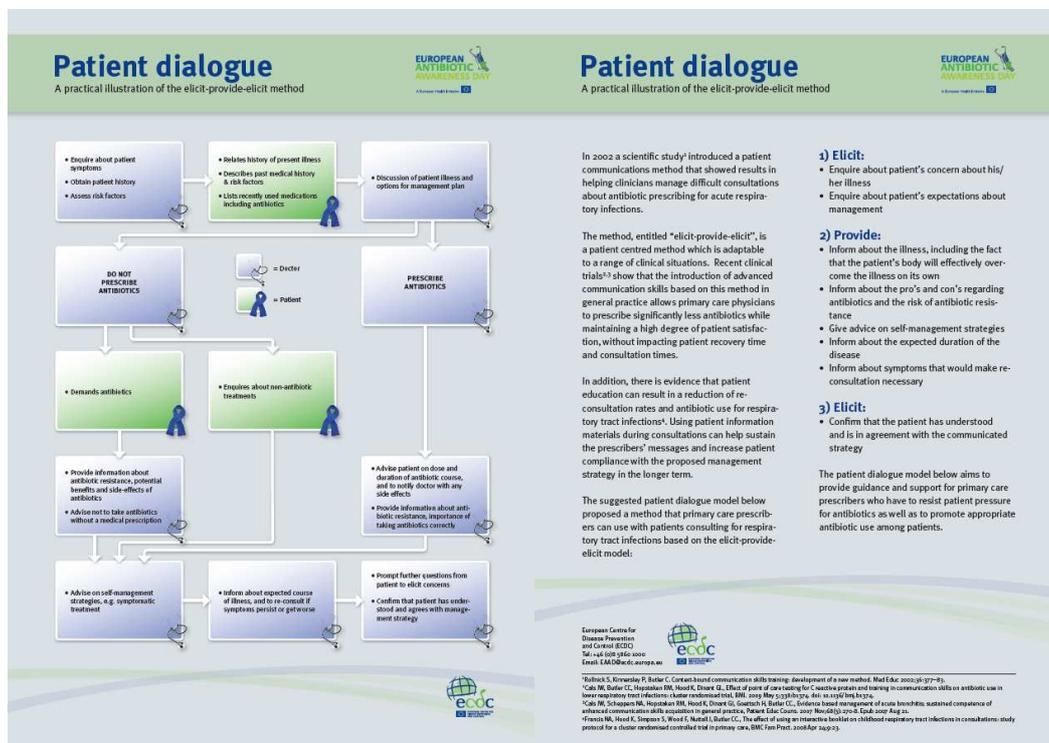
- Right-click on the chart and press on "Chart Object"
- Press "Edit". An excel sheet will be opened.
- To select or de-select data shown in the graph, double click on the bar left from the cells which indicate the coloured line of the graph.
- In order to change the colour or type of the graph lines, right click on the desired line and select "format data series".



3.5 Demo patient dialogue

A model for a patient dialogue, in the form of a flowchart, has been developed on the basis of available evidence. It provides guidance and support for primary care prescribers who encounter patient pressure for antibiotics, and promotes appropriate antibiotic use by patients. The flowchart is supported by an introduction explaining the background for the selected *elicit-provide-elicit* method, including the principles behind the method and the data supporting this approach.

The introduction also emphasises that the proposed method does not require the overall consultation time to be extended and refers to the information leaflets/gadgets that the primary care prescribers can hand out to patients to reinforce its messages.



The flowchart can be used as a fact sheet or as a desk reminder for primary care prescribers during their consultations, especially as evidence shows that with the use of the elicit-provide-elicit method in primary care consultations, primary care prescribers are able to gain practice and in time maintain the same – or lower – average consultation times for patients.

The flowchart will be delivered in adaptable Adobe InDesign format, allowing for its translation in your language. An interactive version of the flowchart in English will also be made available on the EAAD website once it is re-launched in September 2009.

3.6 Patient leaflet

Based on stakeholder feedback on the draft toolkit materials, a patient leaflet has been developed as an easy-to-use communication tool for primary care prescribers to hand out to patients. The leaflet explains to patients what antibiotic resistance is and why appropriate use of antibiotics is

important. The patient leaflet supports the important role that primary care prescribers have in educating patients about the proper use of antibiotics.

The patient brochure aims to promote antibiotic awareness among patients by providing short and clear information for patients on appropriate use of antibiotics. The brochure has been developed as a support for primary care prescribers because it provides them with an easy-to-use communication tool to hand out to patients.

The brochure contains three key messages together with explanations for patients concerning antibiotic resistance. These components reflect the key messages to the general public as developed in 2008 and available on the EAAD website <http://www.ecdc.europa.eu/en/eaad/antibiotics/Pages/messagesForPublic.aspx>:

- Bacteria that are resistant to antibiotics are an increasingly serious health problem
- Take antibiotics only when necessary
- When you do need them, make sure you take antibiotics responsibly



Remember

- Antibiotics won't work in the case of a cold or the flu
- Take antibiotics responsibly and only when they are prescribed by your doctor
- Keeping antibiotics effective is everybody's responsibility

When you *do* need them, make sure you take antibiotics responsibly

When you receive a prescription for antibiotics, you must follow the doctor's instructions in order to minimise the risk of developing resistant bacteria.

If you do not follow the instructions correctly, for example if you shorten the length of time of treatment, if you take a lower dose or if you do not take the antibiotics at the correct time interval prescribed by your doctor, bacteria can become resistant to antibiotics.

Resistant bacteria can stay with you and can also be passed on to others. This may put you and others at risk of not responding to antibiotics next time you need them.

Antibiotic Awareness

Keep Antibiotics Effective

- Follow your doctor's advice on when and how to take antibiotics
- Don't use "left-over" antibiotics
- Ask your doctor or your pharmacist about how to dispose of any remaining antibiotics

For more information on antibiotic awareness please visit: <http://antibiotic.ecdc.europa.eu>

European Centre for Disease Prevention and Control (ECDC)
Tel: +44 (0)20 8996 6000
Email: EAAD@ecdc.europa.eu

The brochure was designed in a tryptic format, with the third page being detachable. This page contains, on one side, three key messages for patients to remember:

- Antibiotics won't work in the case of a cold or the flu
- Take antibiotics responsibly and only when they are prescribed by your doctor
- Keeping antibiotics effective is everybody's responsibility

On the back side, the detachable page contains practical advice for patients suffering from common colds or flu on how to manage their symptoms. This is presented in short sentences and a simple format, and can be used as a checklist for patients who suffer from infections that do not require antibiotic treatment.

It is important to note in this context that the language of the patient leaflet refers to doctors as the source of information and advice, as the intention was to use simple language. In countries where primary care prescribers include nurses, you are encouraged to replace the word “*doctor*” with “*doctor or nurse*”.

As with the other toolkit contents, the patient leaflet is provided in Adobe InDesign format which allows for easy adaptation to country specifics and translation into national languages. The leaflet contains the ECDC and EAAD logos, to which national logos can be added. The leaflet also makes use of the “sitting hedgehog” visual and associated message, which can also be replaced with one of the other EAAD visuals developed in 2008.

3.7 Other ideas for materials that could be developed in addition to the toolkit

The materials in this toolkit should provide a solid core for the EAAD campaign targeted at primary care prescribers in 2009. Depending on available resources, the National AMR Focal Points may consider developing other materials targeted at primary care prescribers, either as information tools or for dissemination to patients.

During various rounds of brainstorming, a few ideas emerged as to possible additional tools, hand-outs or “gimmicks” for the use of primary care prescribers.

- Posters based on the hedgehog visual of the 2008 communication campaign
- Non-prescription pads - notepads with instructions for patients on how to take care of themselves when suffering from a cold or flu. Tick boxes can include similar messages as on patient brochure
- Antibiotics instructions sheet for patients who require antibiotic prescriptions, for example containing information on when to take; what to take; how much; what to do with remaining pills; how important it is to take antibiotics properly
- Pre-printed origami for offices: how to make a paper cup for a hot cup of tea
- EAAD-branded survivor’s pack for the winter instead of antibiotics: blanket, tea, scarf, tissues, vitamins, information booklet
- EAAD-branded paper tissues with key messages or visuals (‘Take care not antibiotics!’)
- EAAD-branded scarves, blankets, hats, gloves, ear warmers, socks
- EAAD-branded bowls, cups or mugs – branded plastic cups for indoor water fountains
- EAAD-branded bath salts
- Tea cosy inspired by the scarf visual
- EAAD-branded box of sweets / mints / lemon drops
- Oranges with EAAD-branded stickers containing key messages or visuals
- EAAD-branded key chains
- Small stuffed toy inspired by the hedgehog visuals

Any additional materials developed in the context of the EAAD campaign should bear the EAAD logo and be accompanied by the text “A European Health Initiative” together with the EU flag. The logo and text are available on the EAAD website in all EU languages, as well as Icelandic and Norwegian, and are also available in design format on the EAAD website to allow for easy adaptation.

3.8 Technical information about the use of template materials

Template letter to primary care prescribers

Format:

- one page A4 letter in Microsoft Word (*.doc)

Branding:

- ECDC, EAAD logos; possibility to add national health ministry logo

Specifics:

- Font: Tahoma 10 pt, black
- Paragraph spacing: 0 pt
- Signatures of Health Commissioner and ECDC Director

Patient Leaflet

Format:

- Tryptic printable on A4 paper, on landscape orientation

Branding:

- ECDC, EAAD logos; possibility to add national health ministry logo

Specifics:

- Font: Meta Plus – Roman
- Font colours:
 - Dark blue C: 97; M: 73; Y: 7; K: 0
 - Black: C: 97; M: 73; Y: 7; K: 100

Fact sheet on antibiotic resistance for primary care prescribers

Format:

- Two-sided factsheet, A4 size

Branding:

- ECDC, EAAD logos; possibility to add national health ministry logo

Specifics:

- Font: Meta Plus – Roman
- Font colours:
 - Dark blue C: 97; M: 73; Y: 7; K: 0
 - Black: C: 97; M: 73; Y: 7; K: 100

Patient dialogue flowchart

Format:

- Two-sided factsheet, A4 size

Branding:

- ECDC, EAAD logos; possibility to add national health ministry logo

Specifics:

- Font: Meta Plus – Roman
- Font colours:
 - Dark blue C: 97; M: 73; Y: 7; K: 0
 - Black: C: 97; M: 73; Y: 7; K: 100



4 *Key contacts*

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Annex 1. List of bibliographical resources used in developing the toolkit materials

Annex 2. List of PGEU contacts in European Countries

Annex 3. List of WONCA contacts in European countries