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RECOVER Work Package 2 and the national coordinating team

Extended Point Prevalence Audit Survey (PPAS)

Results for Georgia





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Extended PPAS Georgia

General information

The point prevalence audit survey (PPAS) was initiated in January 2020 in 18 European countries to capture information with respect to antibiotic prescribing and diagnostic testing for patients presenting in primary care with symptoms of an acute respiratory tract infection. The anonymous registration of patients' characteristics, signs and symptoms, physical examination results and the management of general practitioners with respect to diagnostic testing, prescribing of antibiotics and other medicines, and provided self-care advice was very smoothly implemented in about 125 primary care practices throughout Europe.

This first PPAS was nearly finished when the COVID-19 pandemic hit Europe. Given the success of the PPAS, it was decided to extend the initial survey with COVID-19 specific items. Running this extended PPAS throughout Europe will provide information of how patients with respiratory tract infection are managed during the pandemic, what medicines are prescribed and advice provided, and will reveal marked differences between countries with respect to patient management.

Country information

- Country: GEORGIA
- Registration period: 01 March 2020 to 10 April 2020
- Total number of patient consultations: 240

Overall remarks on Georgian data

- Most patients were seen at the practice
- Most patients had mild severity illness
- Additional testing: O2 saturation was done in most patients seen at the practice and around 35% of patients who were assessed face-to-face did get a CRP
- In 9% of patients who were not assessed face-to-face additional diagnostic tests were performed
- COVID-19 was suspected in only very few patients
- GPs would have recommended testing in all patients suspected of COVID
- GPs were confident about their diagnosis, and somewhat less confident in the few patients in which they suspected COVID
- Only a small number of patients did get an antibiotic, and somewhat more (12%) when the GP suspected COVID
- When COVID was suspected, in half of the patients the authorities were contacted
- Almost none of the patients were referred to hospital
- GPs were confident to very confident about the management of their patients, irrespective of suspicion for COVID



Consultation (N=2	240)							
	Practice	63.8%						
Consultation at	Home	0.8%	0.8%					
	Protective measures: yes		apron/body protection	17.0%*				
		98.7%	face, nose/mour protection	95.4%				
			safety glasses gloves	18.3% 69.9%				
	Telephone	34.6%	34.6%					
	Video/skype	0.8%						
			Result:					
Has patient		0%	Positive	0%*				
already been tested for COVID?	Yes	070	Negative	0%				
			Unknown	0%				
	No	100%						
Patient character								
Age	Median (IQR)	34 (25-42)	•					
Comorbidity	Yes		chronic respiratory condition	25.0%*				
····,		16.7%	diabetes	22.5%				
			cardiovascular diseas	se 42.5%				
Measured:								
Fever	Yes Yes	80%" 86.5%"	Temp>=38 or <36 Saturation <96%	7.3%*				
O ₂ Resp. rate	Yes	93.5%"	Resp. rate >20 or <12	19.4%* 4.2% [^]				
Signs and sympto				1				
Rhinitis	Yes	46.7%						
Sore throat	Yes	58.8%						
Cough	Yes	68.3%	short of breath (dyspnoea)	2.5%#				
			abnormal auscultation	1.9%"				
			(pleuritic) chest pain	3.8%#				
			tachypnoea	0.8% [#]				
General	Yes	68.8%	headache	35.8%#				
symptoms			altered mental 2.5% status					

			fatig	ue	26	i.3%	
			diarr	hoea	3.3	3%	
Overall illness severity	Mild	72.1%					
	Moderate	27.5%					
	Severe	0.4%					
Confidence in	Very confident	8.8%				% ^{\$}	
assessment of	Confident	82.1%		ident	55.6% ^{\$}		
the patient's	Moderately	8.8%		erately	44.4% ^{\$}		
condition	Unconfident	0.4%	Unconfident		0% ^{\$}		
Additional diagnostic tests	Yes			CRP CRP Median (IQR)	34	4.7%*	
		48.4%"		COVID-19 test	5.	.3%	
				Total white blood cell count	4	1.3%	
				Chest X-ray	2	6.7%	
	viral (no COVID-19)				52.1%		
	COVID-19				1.3%		
Suspected aetiology	bacterial				9.2%		
	allergic				2.1%		
	not clear				35.4%		
	acute pharyngitis/tonsillitis/abscess 16.7%				· · · · · · · · · · · · · · · · · · ·		
	laryngitis/laryngot			0.4%			
	influenza-like-illne	22.5%					
	bronchiolitis	0.8%					
	acute bronchitis 8.3%						
	САР	2.5%	2.5%				
	exacerbation COPD/asthma 5%						
Initial working diagnosis	upper RTI	45.4%					
	COVID-19			3.8%			
				Contacted public health 55.6%* authorities?		55.6%*	
				Would you recommend testing?		100%	
	advice for home isolation	86.7%	how many days? Median		10	0 (5-14)	
GP provided	advice for symptomatic treatment	81.7%	(ICQ)				

	a scheduled follow-up visit/call	50%				
	prescribed medication	53.8%	inhaled medicatio	n 22.9% [#]		
			antibiotic	7.1%		
			antiviral medicatio	on 4.2%		
			antihistamines	14.6%		
	advice for family members	59.6%	home isolation	7.5%#		
			social distancing	55.4%		
			other	0%		
			extra handwashing	g 75% [#]		
	preventive measures for patient		sneezing in sleeve	73.8%		
			social distancing	89.2%		
p w re		93.3%	nose/mouth protection	72.9%		
			staying in separate	e 11.7%		
	where to find reliable information	11.3%				
GP prescribed	Antibiotics if worki 19	ng diagnose wa	s COVID-Yes	12.9%		
Confidence that	Very confident	8.8%	Very confident	0% ^{\$}		
provided	Confident	85.8%	Confident	88.9% ^{\$}		
advice/treatmen	Moderately	5.4%	Moderately	11.1% ^{\$}		
t will benefit this	Unconfident	0%	Unconfident	0% ^{\$}		
patient	Very unconfident	0%	Very unconfident	0% ^{\$}		
	Referral to hospital	1.7%				
	Advise contact/refer to COVID-specific authority	10.8%				

* percentage from yes " percentage from F2F contact # percentage from total (n=240) ^ percentage from adults and yes \$ if suspected etiology is COVID-19





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