

Supplementary Table 2. Predictors of the prescription of antibiotics by Flemish general practitioners (GPs) in adults acute cough patients. Categorical variables and continuous variables converted into categorical data. Figures are numbers (percentage) of adults.^a

	Prescribed antibiotics	Not prescribed antibiotics	Crude odds ratio (95% CI) ^b	Significance
Demographics				
Age in years			1.01 (1.00 to 1.02)	†
Age in years ^c			1.11 (1.02 to 1.21)	†
18–35	176 (35)	385 (41)	1	
36–45	128 (26)	239 (25)	1.16 (0.94 to 1.44)	
46–55	97 (20)	178 (19)	1.19 (0.92 to 1.52)	
56–65	95 (19)	141 (15)	1.40 (1.05 to 1.86)	†
Symptoms				
Duration of coughing (days)			1.05 (1.03 to 1.07)	†
Duration of coughing (days) ^c			1.22 (1.12 to 1.32)	†
1–3	190 (38)	451 (48)	1	
4–6	115 (23)	232 (24)	1.28 (1.01 to 1.64)	†
7–9	81 (16)	126 (13)	1.80 (1.32 to 2.46)	†
10–12	27 (5)	41 (4)	1.76 (1.00 to 3.10)	†
>12	87 (17)	98 (10)	2.12 (1.51 to 2.98)	†
Signs				
Number of abnormal auscultatory findings ^d			2.53 (2.02 to 3.18)	†
0	216 (43)	729 (77)	1	
1	128 (26)	129 (14)	3.49 (2.50 to 4.87)	†
2	98 (20)	60 (6)	6.85 (4.26 to 11.02)	†
3	49 (10)	27 (3)	11.80 (6.06 to 22.99)	†
4	9 (2)	3 (0)	25.73 (1.00 to 660.11)	†
GPs' characteristics				
Year of birth			1.01 (0.99 to 1.03)	
Year of birth ^e			0.88 (0.70 to 1.11)	
74–65	71 (14)	98 (10)	1	
64–55	210 (42)	432 (46)	0.67 (0.41 to 1.09)	
54–45	202 (40)	364 (38)	0.74 (0.45 to 1.21)	
44–25	17 (3)	54 (6)	0.46 (0.28 to 0.74)	
Average number of patient encounters per week			1.01 (1.00 to 1.01)	†
Average number of patient encounters per week ^c			1.34 (1.07 to 1.69)	†
<51	56 (11)	98 (10)	1	
51–100	182 (36)	527 (56)	0.62 (0.38 to 1.03)	
101–150	189 (38)	219 (23)	1.36 (0.76 to 2.43)	
151–200	48 (10)	86 (9)	1.26 (0.58 to 2.71)	
>200	25 (5)	18 (2)	2.35 (1.59 to 3.49)	†
Average number of home visits per week			1.02 (1.01 to 1.03)	†
Average number of home visits per week ^c			1.38 (1.17 to 1.63)	†
<11	31 (6)	105 (12)	1	
11–20	62 (13)	180 (20)	1.21 (0.56 to 2.61)	
21–30	123 (25)	328 (36)	1.26 (0.65 to 2.46)	
31–40	83 (17)	130 (14)	2.42 (1.14 to 5.17)	†
>40	193 (39)	168 (18)	3.14 (1.54 to 6.43)	†

Continued ...

Supplementary Table continued. Predictors of the prescription of antibiotics by Flemish general practitioners (GPs) in adults acute cough patients. Categorical variables and continuous variables converted into categorical data. Figures are numbers (percentage) of adults.^a

	Prescribed antibiotics	Not prescribed antibiotics	Crude odds ratio (95% CI) ^b	Significance
Average number of medical representatives/month			1.01 (0.98 to 1.04)	
Average number of medical representatives/month ^c			1.21 (1.01 to 1.46)	†
0–5	28 (6)	104 (11)	1	
5–10	95 (21)	244 (27)	1.69 (0.77 to 3.69)	
11–15	58 (13)	155 (17)	1.49 (0.70 to 3.15)	
16–20	183 (41)	233 (26)	2.62 (1.18 to 5.82)	†
>20	84 (19)	171 (19)	2.23 (0.85 to 5.84)	
ATC J cost ratio ^e			1.05 (1.02 to 1.08)	†
ATC J cost ratio ^{e,a}			1.34 (1.15 to 1.56)	†
<8.1	20 (4)	94 (11)	1	
8.1–12	94 (20)	266 (30)	2.08 (0.93 to 4.63)	
12.1–16	128 (28)	257 (29)	2.88 (1.28 to 6.45)	†
16.1–20	125 (27)	127 (14)	3.92 (1.73 to 8.86)	†
>20	95 (21)	141 (16)	3.96 (1.91 to 8.21)	†
ATC J volume ratio ^e			1.35 (1.19 to 1.53)	†
ATC J volume ratio ^{e,a}			1.44 (1.24 to 1.66)	†
<2.1	31 (7)	146 (17)	1	
2.1–3	140 (32)	358 (41)	2.46 (1.23 to 4.94)	†
3.1–4	111 (25)	220 (25)	2.40 (1.10 to 5.24)	†
4.1–5	68 (16)	61 (7)	5.27 (2.28 to 12.16)	†
>5	87 (20)	82 (9)	5.42 (2.74 to 10.71)	†

† means $P < 0.05$. ^aDenominators vary due to missing values. ^bScore test using alternative logistic regression. ^cCategorical variable or continuous variable converted to categorical variable analysed as an ordinal variable not as a class variable. ^dLess vesicular breathing, wheezing, ronchi or crepitations. ^eThe ratios of the gross amount for antimicrobials for systemic use (ATC J)/the gross amount for all pharmaceutical specialties and the volume (Daily Defined Dosage [DDD]) of ATC J/the volume for all pharmaceutical specialties are both expressed as percentages on individual prescribing feedback from the National Sickness and Invalidity Institution (NSII) to GPs.