

L0002 Point-of-care testing for common infections in South Africa: primary care clinicians' perceptions on adoption

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Background: Novel point-of-care tests (POCTs) have the potential to transform antibiotic prescribing in community settings. However, POCTs have only been trialled in high-income countries and cannot be assumed to have the same impact in resource-poor settings. We aimed to explore the perceptions of clinicians about making antibiotic prescribing decisions for two common infection syndromes (acute cough, urinary tract infection) and their perceptions on how POCTs could be adopted in their workplace.

Materials/methods: Qualitative semi-structured interviews with 23 primary care clinicians (nurses and doctors) at publicly-funded primary care clinics in the Western Cape Metro district, South Africa. Thematic analysis was used to analyse the data.

Results: Clinicians see value in introducing novel POCTs to community settings to improve diagnostic certainty in the treatment decisions for common infections. However, social determinants of health (e.g. patient access to care), perceived patient expectations for antibiotics, and costly non-antibiotic strategies also influenced prescribing decisions. Clinicians perceived that POCTs would provide an objective demonstration for patients that antibiotics were not needed. They wanted POCTs to be tested to fulfil the needs of the local context in terms of their clinical and cost-effectiveness.

Conclusions: In the context of resource-poor settings in South Africa, there will be important social determinants of prescribing that may override guideline-driven prescribing. However, there are promising signs that novel POCTs for common infections should be tested in community settings provided they fulfil the needs of the local context and patient population.

