WHO GAP AMR Newsletter No.22
14-28 February 2017

IMPLEMENTATION OF THE GLOBAL ACTION PLAN ON ANTIMICROBIAL RESISTANCE

Updated Cochrane Review finds antibiotic stewardship works but not optimally

An updated Cochrane Review has found that interventions to improve antibiotic prescribing in hospitals result in better compliance with prescribing guidelines, reduced duration of antibiotic treatment, and shorter hospital stays without any impact on mortality. Interventions were successful in safely reducing unnecessary antibiotic use in hospitals. Despite this, it was found that the majority did not use a widely adopted behaviour change technique, which is to audit and provide feedback on performance. The authors conclude that effective communication of the review results could have considerable health service and policy impact.

A global call to collaborate in antibiotic stewardship

This Lancet article provides examples of international collaborations to address optimal prescribing, focusing on five countries that have developed different approaches to antibiotic stewardship—the USA, South Africa, Colombia, Australia, and the UK.

Next steps to tackle AMR in India

Recognising that AMR is a cross-cutting issue that requires effective collaboration and cooperation amongst all sectors, the Government of India is convening a high-level inter-ministerial review meeting on AMR to be held 22 February 2017. Ministers and senior officials from nine Ministries are invited. All stakeholders and sectors are being urged to join forces and collaborate to tackle the serious challenge of AMR in India.

Fight antibiotic resistance - it's in your hands

WHO's global annual campaign: SAVE LIVES: Clean Your Hands, to be held on 5 May 2017, has announced its theme - 'Fight antibiotic resistance - it's in your hands'. The calls to action are aimed at different groups:

- Health workers: “Clean your hands at the right times and stop the spread of antibiotic resistance.”
- Hospital Chief Executive Officers and Administrators: “Lead a year-round infection prevention and control programme to protect your patients from resistant infections.”
- Policy-makers: “Stop antibiotic resistance spread by making infection prevention and hand hygiene a national policy priority.”
- Infection prevention and control leaders: "Implement WHO's Core Components for infection prevention, including hand hygiene, to combat antibiotic resistance.”

This year the campaign demonstrates WHO's commitment to strong collaborative working between AMR and infection prevention and control (IPC). New resources, to be launched shortly, will be developed with the Antibiotics: Handle With Care campaign in mind.

A campaign toolkit is available in English and French to help health facilities plan their overall campaign actions. Those who register for the campaign will receive a monthly newsletter which can be found here and gives more background to the campaign aims for 2017.

From now until 5 May, the WHO IPC Unit will share examples of the global reach of the campaign in different health facilities and countries. The campaign will culminate with a free teleclass to be delivered by Professor Didier Pittet on 5 May.

Register here for the teleclass.
**Relaunch of the Global Infection Prevention and Control Network**

Representatives from key institutions will meet as part of the WHO Global Infection Prevention and Control Network on 27 and 28 February 2017 in Geneva. This will be a relaunch of the network given that the work on IPC has been reorganized at WHO Headquarters following the launch of the WHO IPC Global Unit. New terms of reference will be agreed at this meeting and institutions will commit to working with WHO on IPC and AMR surveillance, as the network will work closely with those leading the WHO Global Antimicrobial Resistance Surveillance System. Future work of the network will be posted on the WHO IPC web pages.

**Implementing infection prevention and control at national and facility level – some country examples**

During the December 2016 IPC expert meeting (See January newsletter), countries gave presentations on implementing IPC activities at national and facility level - a selection of these presentations follows:

**Chile:** National IPC activities in Chile use a multimodal strategy including developing national policies, capacity building, and monitoring/auditing. Monitoring results demonstrate a decrease in healthcare-associated infections over the last decade. External evaluation of facilities includes use of a non-punitive, field-tested checklist that is conducted biannually over a two-day period, the results of which are linked to an improvement plan. Evaluation standards are transparent and training courses are offered to national hospitals.

*Photo: Country representatives presenting on aspects of implementing IPC measures at national and facility level.*

**Global Antimicrobial Resistance Surveillance System (GLASS) Updates**

The WHONET for GLASS manual is now available in all six UN languages. **Enrolment update:** 41 countries have expressed interest in enrolling in GLASS, of which 30 are fully enrolled.

**Fighting AMR: EU health awards**

The winners of the EU Health Award were announced on February 6th 2017 at the Horizon Prize and EU Health Award for NGOs joint ceremony in Leuven, Belgium. To read more about the prize winning NGOs (will be profiled in our next issue), click here.

A finger prick test that can show almost instantly whether an infection is bacterial or viral has won EUR 1 million from the EU as part of the first-ever Horizon Prize.

**Call for consultants**

The AMR Secretariat is seeking consultants to assist in the implementation of the Global Action Plan on AMR on issues related to national action plan development and surveillance. It is also seeking proposals with regards to making the case for AMR as a development issue, with a view to securing sustained funding for the implementation of national action plans on AMR. Terms of Reference available here.

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21st Expert Committee on the Selection and Use of Essential Medicines

The meeting of the 21st WHO Expert Committee on the Selection and Use of Essential Medicines will be held at WHO Headquarters, Geneva, from 27 to 31 March 2017 to revise and update the WHO Model List of Essential Medicines including Essential Medicines for Children. Applications for public comments are now online. Comments may be made until 24 February 2017 and will be published on the webpage, along with all other documents relating to the meeting of the Expert Committee.

Second global point prevalence survey of hospital antimicrobial use and resistance

Supervised by a European Task Force of leading experts and piloted by the University of Antwerp (Belgium), the Global Point Prevalence Survey of Antimicrobial Consumption and Resistance (GLOBAL-PPS) coordinates surveillance of antimicrobial prescribing and resistance in hospitalized patients worldwide. It aims to raise global awareness on antimicrobial resistance and the inappropriate use of antimicrobials in hospitals throughout the world. The first Global-PPS was conducted in 2015 and included 335 hospitals from 53 countries across six continental regions, using a standardized and validated method. The second Global PPS is a “one-day” cross-sectional Point Prevalence Survey and will take place between January and June 2017. This global survey is accessible to any hospital worldwide. For more information click here or email global-pps@uantwerpen.be.

The Baltic Antibiotic Resistance Network (BARN) comprises 12 member countries. The scope of BARN is focused on capacity-building in the area of AMR, IPC, and related laboratory services. Outcomes measured include hand hygiene practices and catheter-associated urinary tract infections. Key challenges include the culture of fear of reporting and the ability to secure funding to ensure sustainability of activities. The value of such regional networks was recognised.

Ecuador: Introduction of an IPC programme at a hospital in Ecuador outlined the adoption of the WHO multimodal improvement strategy including baseline evaluation, intervention design, surveillance, policy and protocol development, awareness raising and data collection. The specific example of hand hygiene compliance as a key quality indicator for improvement was strongly noted. A number of challenges such as the ‘fear’ generated by the media after healthcare-associated infection rates were first reported were also outlined.

23rd Tripartite Annual Executive Coordination Meeting

This meeting between the Food and Agriculture Organization of the United Nations (FAO), the World Organisation for Animal Health (OIE), and the World Health Organization (WHO) was held on 7-8 February, 2017, in Geneva, hosted by WHO. Senior officers from the three organizations discussed common priority health issues at the human-animal-ecosystem interface and food safety, including antimicrobial resistance (AMR). Following the adoption of the Global Action Plan on AMR, the tripartite agreement has gained momentum in terms of standards development, advocacy, awareness, and political commitment. The Tripartite recognizes the advantages of multi-sectoral approaches and the benefits of reinforcing collaboration among the three sister organizations. The three organizations reiterated their commitment to strengthen coordination and continued collaboration in several areas of importance, including AMR. OIE will lead the Tripartite Secretariat until the next annual Tripartite Executive Meeting, which will take place in Paris in February 2018.

Photo: (L) Matthew Stone. Deputy Director General, OIE and (R) Ren Wang, FAO Assistant Director General, at the 23rd Tripartite Annual Executive Coordination meeting, 7-8 February 2017, Geneva.
Resources

• Antimicrobial resistance: A manual for developing national action plans and supporting documents and tools. Click here.

• Global Antimicrobial Resistance Surveillance System (GLASS) documents and tools.

• For information on infection prevention and control, click here.

• For information on antimicrobial resistance and the food chain, click here.

• For AMR activities at the Food and Agriculture Organization of the UN, click here.

• For AMR activities at the World Organisation for Animal Health (OIE), click here.

• Information on HIV drug resistance available here.

• Information on anti-malarial drug resistance and containment available here.

• For information on multidrug-resistant tuberculosis (MDR-TB), click here.

UPCOMING MEETINGS/EVENTS

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<td>Quality Assurance and Rational Use of Essential Medicines in Pacific Islands</td>
<td>Nadi, Fiji</td>
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<td>Countries Meeting</td>
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<td>Feb 21</td>
<td>AMR National Action Plan Stakeholders’ Meeting, Uganda National Academy of Sciences</td>
<td>Fairway Hotel, Kampala, Uganda</td>
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<td>Feb 22</td>
<td>High level inter-ministerial meeting on AMR</td>
<td>New Delhi, India</td>
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<td>Feb 27-28</td>
<td>WHO Global Infection Prevention and Control Network relaunch</td>
<td>WHO HQ, Geneva</td>
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<td>NAP workshop for Eastern Mediterranean countries</td>
<td>Islamabad, Pakistan</td>
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<td>Mar 7-9</td>
<td>Meeting to support NAPs under “One-Health” approach for Mercosur countries</td>
<td>Rio de Janeiro, Brazil</td>
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<td>Mar 23-24</td>
<td>Expert consultation meeting on health workforce education and AMR control</td>
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<td>Mar 28-Apr 1</td>
<td>WHO/FAO/OIE NAP meeting</td>
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Please let us know of your upcoming events for inclusion in the newsletter. We welcome your suggestions and comments. For all communications, and if you would like to subscribe to the newsletter, please contact the Secretariat at whoamrsecretariat@who.int. Responsibility for newsletter contents rests with the AMR Secretariat Director: Marc Sprenger. Newsletter editor: Breeda Hickey.