Antibiotic-resistant gonorrhoea on the rise

Data from 77 countries show that antibiotic resistance is making gonorrhoea—a common sexually-transmitted infection—much harder, and sometimes impossible, to treat. WHO reports widespread resistance to older and cheaper antibiotics. Some countries—particularly high-income ones, where surveillance is best—are finding cases of the infection that are untreatable by all known antibiotics. There are about 78 million new cases of gonorrhoea every year but the R&D pipeline for gonorrhoea is relatively empty, with only 3 new candidate drugs in various stages of clinical development. To address this, the Global Antibiotic Research and Development Partnership (GARDP) has developed a R&D roadmap to meet the urgent need for new drugs to treat gonorrhoea.

Entasis Therapeutics and GARDP to develop a new treatment for drug-resistant gonorrhoea

Zoliflodacin, a novel first-in-class oral antibiotic and one of the only treatments in development to address the rapidly-growing threat of drug-resistant gonorrhoea will enter pivotal trials, thanks to a new partnership between the not-for-profit Global Antibiotic Research and Development Partnership (GARDP) and Entasis Therapeutics. They will co-develop zoliflodacin in a global Phase III clinical trial to be carried out in countries including South Africa, the United States of America, and Thailand. If zoliflodacin receives regulatory approval, Entasis will grant GARDP an exclusive license with sublicensing rights in most low- and middle-income countries, while retaining commercial rights in high-income markets. Both GARDP and Entasis are committed to affordable and equitable pricing in their respective territories. More information here.

Increasing resistance to HIV drugs

WHO has detailed an increasing trend of resistance to HIV drugs in a new report, warning that this is a growing threat. The HIV drug resistance report 2017 shows that in 6 of the 11 countries surveyed, over 10% of people starting antiretroviral therapy had a strain of HIV resistant to the most widely used medicines.
Tackling health care-associated infections: a success story from Chile

Being admitted to hospital in Chile during the 1980s could be a risky affair. In some hospitals, there was a 1 in 5 chance a patient would pick up an infection—some of them life-threatening—during the course of their treatment. Getting an infection was often considered a “normal complication” of healthcare. Starting in 1983 a national infection-fighting initiative led by Dr Fernando Otaiza, Chief of Infection Control in Chile’s Ministry of Health, set about turning the tide. One of the secrets to Chile’s success is that the approach to tackling infections was multi-pronged and didn’t rely on any one intervention. But Dr Otaiza says hand hygiene was the single-most important measure in reversing the trend.

“It’s not the only one and sometimes it doesn’t work alone, but without hand hygiene we wouldn’t have been able to show these kinds of results,” he says.

Good hand hygiene is also helping to protect Chile against the threat of antibiotic-resistant infections. One of the key lessons, Dr Otaiza says, is that making progress against health care-associated infections isn’t just a matter of getting health workers to change their behaviours—it’s about getting the top levels of hospital management to see the need for change. More information here.

Update from the Interagency Coordination Group (IACG) on AMR

The UN Secretary-General’s Interagency Coordination Group on Antimicrobial Resistance met by teleconference on 30 June 2017. The main topic of discussion was their work plan for 2017-2019. Member States and other key stakeholders will have an opportunity to comment on the work plan through a datacol form on the WHO AMR webpage. Details will be shared as soon as they are available. A draft mapping exercise of the AMR landscape of activities by FAO, OIE and WHO was also presented to IACG members. This map will be extended to other relevant UN organizations in the near future. The IACG will meet next by teleconference on 12 September 2017 and then face-to-face at OIE headquarters in Paris 16-17 Oct.

Global Antimicrobial Resistance Surveillance System (GLASS) update

Enrolment update: 51 countries have expressed interest in enrolling in GLASS, of which 40 are fully enrolled.

Symposium: National Surveillance Systems for Antimicrobial Resistance and GLASS in the Asian Region

Organized by the Research Institute of Bacterial Resistance (RIBR) in cooperation with the Korean Centres for Disease Control and Prevention and the Korean Society of Clinical Microbiology, this symposium took place 7 July 2017 in Buyeo, Korea. National GLASS focal points from Cambodia, Japan, Korea, Philippines and Thailand participated in the meeting and shared experiences and data from November 2016. Results of the survey are available in the global open-access tripartite AMR database. The database currently contains data for the reporting year 2016-17. Moving forward, countries will be asked to repeat the self-assessment annually. Taking lessons learned, WHO, FAO and OIE will revise the questionnaire, without deviating too much from the original, so that this year is an effective baseline. Therefore we are now seeking YOUR feedback on:

- the questions asked
- the process followed
- major omissions or ways the questionnaire can be improved.
- the database and dissemination of results

The questionnaire is available here. Kindly provide your feedback before 11 August 2017 to whoamrsecretariat@who.int.

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OIE/FAO/WHO Sub-Regional meeting on AMR National Action Plan (NAP) Implementation for Central Asian Republics

At this sub-regional meeting held in Bishkek, Kyrgyzstan on 27-29 June 2017, representatives from the human and animal health and agricultural sectors of Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan presented their countries’ progress towards NAP development. Currently, all four countries are in the process of drafting their NAPs based on round-table discussions and multisectoral working group sessions. Consultation with relevant stakeholders is ongoing, and adaptation or endorsement by national authorities is expected to take place by 2018. Many remaining challenges were identified, including the review and adaptation of legislative frameworks, the surveillance of AMR with the establishment of good quality (and modernized) laboratory services, and the actual implementation of One Health action plans as this requires continuous engagement at all levels. The meeting highlighted the need to continue to build on a One Health Approach in containing the spread of AMR.

Calls for an Agreement for Performance of Work

(1) Understanding options to increase investment in national action plans on antimicrobial resistance in low- and middle-income countries

The AMR Secretariat is seeking expressions of interest for this piece of work on issues related to national action plan implementation. Terms of Reference and how to apply can be found here.

(2) Options for global stewardship to combat antimicrobial resistance

WHO is looking for an individual to work on options and possible models for global stewardship to preserve the effectiveness of existing antimicrobials. More information here.

The Northern Dimension Partnership in Public Health and Social Well-being

Eight countries within the The Northern Dimension Partnership in Public Health and Social Well-being (NDPHS) have launched a collaborative project entitled “NorthernGLASS” with the overarching purpose to collaborate and share lessons from early implementation of Global Antimicrobial Resistance Surveillance System (GLASS). The NDPHS is a cooperative effort of ten governments, the European Commission and eight international organizations in the Northern Dimension area around the Baltic Sea.

A specific purpose of NorthernGLASS is to look at the WHO manuals and informative materials to see if clarifications or additional supporting tools could be useful. The project, which is coordinated by the WHO Collaborating Center at the Public Health Agency of Sweden, held a kick off meeting on 18 January 2017.

New guidance on “Integrated surveillance of antimicrobial resistance in foodborne bacteria: Application of a One Health approach”

This new guidance from the WHO Advisory Group on Integrated Surveillance of Antimicrobial resistance (AGISAR) was developed in collaboration with FAO, OIE and joint FAO/WHO Codex Alimentarius, to assist countries and other stakeholders in the establishment and development of programmes of integrated surveillance of AMR in foodborne bacteria (i.e. bacteria commonly transmitted by food) by taking a One Health approach.
Resources

• For information regarding national action plans on antimicrobial resistance 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.

• To access the WHO/UNICEF WASH in Health Care Facilities knowledge portal, 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 (FAO), click here.

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

UPCOMING MEETINGS/EVENTS

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Please let us know of your upcoming events for inclusion in the newsletter. We also welcome your suggestions and comments. For all communications, please contact the Secretariat at whoamrsecretariat@who.int. Responsibility for newsletter content rests with the AMR Secretariat Director: Marc Sprenger.

Newsletter editor: Breeda Hickey.