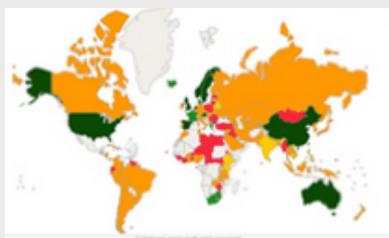




IMPLEMENTATION OF THE GLOBAL ACTION PLAN ON ANTIMICROBIAL RESISTANCE



Global database for antimicrobial resistance country self-assessment



The 70th World Health Assembly also marked an exciting development in the field of antimicrobial resistance (AMR). A database has been launched based on [the first global assessment](#) of how countries perceive their progress on AMR. This important step, taken by WHO, FAO and OIE, provides a clearer picture of existing initiatives, processes and activities around AMR. It also highlights any gaps and empowers countries to reach out for guidance and support. Encouragingly, more than 90% of people in the world (6.5 billion) live in a country that has developed, or is developing, a multisectoral national action plan on AMR. However, there is still a lot of work to be done: the international community must rally around low-income countries, burdened with higher rates of infectious disease and weaker health systems, to help them implement impactful and achievable plans.

New WHO Director-General highlights antimicrobial resistance as perfect example of complex challenges the world faces

The Member States of WHO have elected Dr Tedros Adhanom Ghebreyesus as the new Director-General of WHO: he will begin his five-year term on 1 July 2017. As Director-General, Dr Tedros intends to focus on five key areas, of which strengthening the capacity of national authorities and local communities to detect, prevent and manage health emergencies, including antimicrobial resistance (AMR), is one. In his statement to the Assembly Dr Tedros highlighted AMR as “the perfect example of the complex, multisectoral, multi-stakeholder challenges we will increasingly face in the future, requiring a more agile, strategic, innovative, collaborative leadership”. Other priorities for the new Director-General include advancing universal health coverage; putting the well-being of women, children and adolescents at the centre of global health and development; supporting national health authorities to better understand and address the effects of climate and environmental change on health; and building WHO into a more effective, transparent and accountable agency. Dr Tedros has stated that he will address AMR as a global health priority, championing the ‘One Health approach’ and working with agencies such as FAO and OIE, to advance a public health approach to monitoring and mitigating its impact.



AMR at the World Health Assembly

In Committee meetings, there was active discussion and support for the ongoing progress in addressing AMR. 60 Member States made interventions with 11 interventions from civil society and organizations in relations with WHO. The importance of intersectoral action was reiterated with support for WHO action in collaboration with FAO and OIE. Ongoing support to countries that have not yet developed a national action plan was requested. The report on “Improving the prevention, diagnosis and clinical management of sepsis” was well received and it is anticipated that a resolution on the same will be adopted during the Assembly. The importance of developing the framework on stewardship and development was reiterated. Delegates welcomed the establishment of the Interagency Coordination Group on AMR and look forward to receiving updates. There was active discussion about the role of the Joint External Evaluation in validating the self-assessment questionnaire. The AMR Secretariat clarified that, as with the entire JEE process, countries’ participation in these processes is voluntary.

First meeting of Interagency Coordination Group on AMR

The first meeting of the Interagency Coordination Group on AMR (IACG), which was established by the UN Secretary-General as a result of the high-level meeting on AMR in September 2016, took place at UN Headquarters, New York, 2-3 May 2017. The group was co-chaired by the UN Deputy Secretary-General and the Director-General. The co-chairs proposed that three members, Professor J Chen, Professor S Davies and Ms M Gyansa-Lutterodt be appointed as 'conveners' to guide the process of work. The group discussed approaches to include other agencies and stakeholders in their deliberations through a range of modalities, including inviting non-members as observers. The group also discussed the importance of engaging Member States and such critical stakeholders as civil society, industry and professional organizations. The draft terms of reference, established by the Secretary-General, were discussed and adopted, as were a statement of principles and initial projects to be commissioned. The IACG will meet next by teleconference in late June 2017.

Ten years in public health 2007-2017

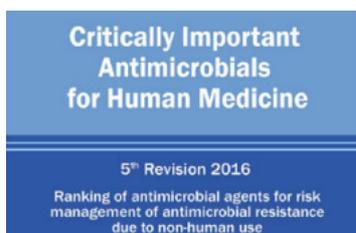
This report chronicles the evolution of global public health over the decade that Dr Margaret Chan has served as Director-General at WHO. [Chapter 4](#) entitled "*A global health guardian: climate change, air pollution, and antimicrobial resistance*" highlights AMR as one of the most complex global health challenges with potentially serious public health, economic, and social consequences around the world.

Global Antimicrobial Resistance Surveillance System (GLASS) update

Enrolment update: 48 countries have expressed interest in enrolling in GLASS, of which 37 are fully enrolled.

5th Revision of WHO list of Critically Important Antimicrobials for Human Medicine (CIA list)

WHO has just published the 5th revision of the CIA list. The CIA list is intended for all stakeholders involved in managing antimicrobial resistance to ensure that all antimicrobials, especially critically important antimicrobials, are used prudently both in human and veterinary medicine. In this revision, classes of drugs categorized as highest priority critically important antimicrobials are quinolones, third and higher generation cephalosporins, macrolides/ketolides, glycopeptides and polymyxins. Polymyxins were newly added because of the increasing usage of colistin globally, the discovery of *mcr-1* and *mcr-2* genes, and the spread of colistin resistant bacteria via the food chain. See the [full report](#) for more information.



Further action required to strengthen AMR surveillance

The 2nd High Level Technical Meeting on Surveillance of Antimicrobial Resistance (AMR) for Local and Global Action concluded by defining further action to strengthen surveillance capacities and collect quality data to inform a comprehensive response to AMR. The consultation in Stockholm brought together representatives from 45 Member States from all WHO regions, WHO Collaborating Centres, and collaborative platform members. Key discussions centred on experiences of countries in developing their national AMR surveillance system and applying the GLASS methodology. Participants agreed on a framework for emerging AMR reporting (EAR) and risk assessment (presented by WHO) that will form part of future GLASS developments. The meeting, held on 27-28 April, was



Photo: Participants at the 2nd High-level Meeting on Surveillance of AMR, Stockholm, 27-28 April 2017.

hosted by the Ministry of Health and Social Affairs of Sweden and the Public Health Agency of Sweden and co-sponsored by WHO.

Editor's picks

Strategic and Operational Guidance on Animal and Environmental Aspects

National Action Plans on Antimicrobial Resistance for Developing Countries

Centre for Science and Environment, Jan 2017. CSE is a public-interest research and advocacy organization based in New Delhi. This [document](#) is based on expert inputs and deliberations from the International Workshop on National Action Plan on Antimicrobial Resistance for Developing Countries. The workshop, focusing on animal and environmental aspects, was organized by CSE 10–11 November 2016 in New Delhi.

Researchers find door handles to be significant source of MRSA in hospitals

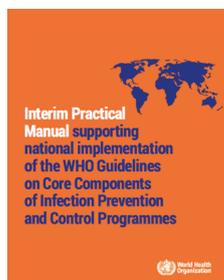
Studies have implicated *Staphylococcus aureus* as the leading cause of septicemia in the Tamale metropolis of Ghana. The aim of this [study](#) by Saba, Amenyona & Kpordeze was to determine the prevalence and antibiotic susceptibility of *S. aureus* and Methicillin Resistant *S. aureus* (MRSA) in the environments of three hospitals in Ghana.

What's wrong in the control of AMR in critically ill patients from low- and middle-income countries?

The authors of this [study](#) conclude that thorough implementation of setting adjusted IPC practices, better antibiotic stewardship and increased surveillance are essential elements to counter the threat of severe multidrug-resistant bacterial infections in Intensive Care Units in low- and middle-income countries.

New practical manual for implementation of core components of IPC programmes at the national level

This recently-launched [manual](#) is intended as a tool for policy-makers and implementers within Ministries of Health working on IPC, particularly in the context of AMR national action plans. It uses a classic stepwise approach to implementation and includes a range of country case studies and supporting tools. It is released as an interim version as the intention is to continue to incorporate lessons learned at country level so please forward any good examples or tools to Sara at tomczyk@who.int. An accompanying video featuring interviews from people in the field can be viewed [here](#).



Antimicrobial Stewardship Training Workshop, Western Pacific Region

A 5-day training workshop on antimicrobial stewardship (AMS) was held in the Philippines 2–6 May. The workshop was attended by doctors, microbiologists and pharmacists from 10 public and private hospitals in the Philippines, as well as representatives from Cambodia, Lao PDR, Mongolia and Viet Nam. Core elements covered included: setting up a hospital AMR surveillance system, formulary restrictions, audit, education and performance evaluation. As part of the workshop, six pilot hospitals presented updates on their implementation of an AMS programme in their respective hospitals.

Antimicrobial Medicines Consumption Network. AMC data 2011–2014 (2017)

This [report](#) sets out and analyses data on antimicrobial medicines consumption collected from non-European Union countries in the WHO European Region and Kosovo. Its aims are to support countries that are building or strengthening their national surveillance systems on AMC and to stimulate the sharing of data both within and between countries.

Strengthening links between AMR, IPC, WASH and midwifery

The Essential Competencies for Basic Midwifery Practice have been revised to include WASH, IPC and AMR and submitted to the Board of the International Confederation of Midwives (ICM) for review. These will be shared on the [WASH in HCF knowledge portal](#) once they have been finalized. Work is also underway to develop a set of indicators for monitoring WASH in birthing settings which will be ready in the 3rd quarter of 2017.

Research agenda for water, sanitation & AMR

Understanding and addressing the role of WaSH in combatting AMR is a critical element of the global action plan on AMR. This [paper](#) identifies three themes for research and the development of guidance: (i) how to reduce the spread of AMR to humans via the environment and to introduce effective intervention measures; (ii) the need to investigate and quantify human exposure to AMR via water and its health impact; and (iii) the need for a uniform and global surveillance strategy.

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, click [here](#).
- For AMR activities at the World Organisation for Animal Health (OIE), click [here](#).

UPCOMING MEETINGS/EVENTS

May 22-31	Seventieth World Health Assembly	Geneva, Switzerland
May 23-25	Training of Trainers Workshop for regional AMR resource persons	Harare, Zimbabwe
May 26-27	G7 meeting	Taormina, Sicily, Italy
June 8-9	Monitoring AMR: Outcome & Impact Indicators meeting	WHO HQ, Geneva
June 13-16	1st AMR National Focal Point workshop (10 West African countries)	Douala, Cameroon
June 15-16	Roundtable on Antimicrobial Resistance and Water, sanitation and hygiene (WASH). Organised by Sanitation and Hygiene Applied Research for Equity (Share) and the Antimicrobial Resistance Centre	London School of Hygiene & Tropical Medicine, London, UK
June 29	Strategic Technical & Advisory Group meeting	Teleconference
June 27-30	2nd AMR National Focal Point workshop (10 West African countries)	Lome, Togo
July 5-6	Developing priorities for WHO activities on AMR and the environment.	Nieuwegein, Netherlands. WHO & KWR Watercycle Research Institute
July 20	G20 Leaders' Summit	Hamburg, Germany
Sept 5-6	DRIVE-AB Final Conference. Further information here	Brussels, Belgium

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 content rests with the AMR Secretariat Director: Marc Sprenger.
Newsletter editor: Breedia Hickey.