Global action plan for HIV drug resistance 2017-2021

Online public consultation
WHO welcomes input from stakeholders and the general public on the draft outline of the Global Action Plan on HIV drug resistance (HIVDR), made available online for comments and feedback on 18 July 2016, during consultations at the International AIDS Conference in Durban (18-22 July 2016). Click here to access the draft outline of the Global Action Plan on HIVDR and for information on how to provide your input. The deadline for inputs is Friday 16 September 2016.

The HIV drug resistance surveillance guidance 2015 update is available here. This update provides an overview of the essential elements that programme managers should include in programme planning to prevent and monitor the emergence of HIVDR. It also describes programmatic relevance and use of data.

A success story - reducing risk of Surgical Site Infections in Kenya
From 2013 to 2015, WHO and the Johns Hopkins Armstrong Institute for Patient Safety and Quality, supported the implementation of a Surgical Site Infection (SSI) prevention

WHO, governments and health agencies commit to advancing global health security

Panellists at the “Advancing global health security” meeting June 27-29 2016 Bali, Indonesia

At a three-day meeting on advancing global health security, WHO, governments, financial institutions, development partners, and health agencies from across the world committed to accelerate strengthening and implementation of capacities required to cope with disease outbreaks and other health emergencies. One of the key action packages of the GHSA is AMR.

The meeting, “Advancing Global Health Security: From Commitments to Actions”, highlighted the critical importance of flexible preparedness planning, community strengthening and engagement, information sharing, strengthening of intersectoral collaboration of national and international partnerships, and the critical role that governments and technical partners play in financing and implementing them. Investing in these systems will require strong ownership and supportive leadership at the highest levels. A number of side events also took place during the meeting, notably a World Bank Group meeting on sustainable financing for preparedness; an Alliance meeting on the acceleration of IHR implementation; and a Government of Indonesia meeting on zoonoses. To read more, click here.

UNGA High-Level meeting
The scope, modalities, format and organization of the high-level meeting on AMR convened by the President of the United Nations General Assembly, in September, can be found here.
WHO GAP AMR Newsletter No.14
August 2016

“AMR is a ‘wicked’ problem that requires collaboration, persistence and above all trust.”

This was one of the messages that emerged from the meeting “A One Health approach to building AMR National Action Plans in middle and low income countries” organized by Wilton Park UK June 29 – July 1. Roundtable presentations, discussions and facilitated group work focused on the global challenge of AMR highlighted by scientific research as well as national challenges and opportunities for developing and implementing national action plans on AMR. This included sharing of experiences in developing national action plans with a One Health approach in limited resource settings, balancing the trade-offs, building national buy in through strengthening advocacy and the challenges and next steps in implementing the national action plans. Outcomes from the discussions will inform the upcoming AMR agenda at the United Nations General Assembly, September 2016.

Photo: Katarzyna Bialasiewicz

The meeting, organized with support from the Fleming Fund, brought together over 70 participants from low and middle income countries who are leading the development and implementation of national action plans as well as the UK Chief Medical Officer, Chief Veterinary Officer, experts from high income countries and representatives from WHO (HQ, WPRO, PAHO), FAO, OIE and academia. The report is available here.

WHO ranking of antimicrobials according to their importance in human medicine has been updated

The WHO ranking of antimicrobials according to their relative importance in human medicine was recently updated. The updated ranking allows

Stimulating innovation, sustainable use and global access to antibiotics

On June 2 2016, IMI DRIVE-AB, a public-private consortium, held the “Stimulating innovation, sustainable use and global access to antibiotics” conference in Amsterdam. Discussions identified: key gaps in global action and policy, mechanisms for ensuring sustainable use, and new
stakeholders in the agriculture sector and regulatory agencies to focus safeguarding efforts on drugs used in food animals that are the most important to human medicine. The authors identify those antimicrobials whose current large scale use needs to be addressed urgently. The paper by Collignon et al can be accessed here.

**Bulletin of WHO editorial on why a global response to AMR is needed**

Tim Jinks et al explain why a global response is needed to confront AMR. To read the editorial, click here.

**Secretariat Update**

In order to strengthen WHO's work on AMR, and as a consequence of restructuring of the Outbreaks and Health Emergencies cluster (OHE), we are pleased to announce that the team working on AMR surveillance and national action plans in the department of Pandemic and Epidemic Diseases (PED) will move into the AMR Secretariat in the Director-General's Office. The department of Food Safety, Zoonoses and Foodborne Diseases (FOS) will move to the Cluster for NCDs and Mental Health. The strong working relationship between FOS and the AMR Coordinating Secretariat will continue and flourish.

economic models to stimulate antibiotic innovation while ensuring access and sustainable use. The conference was followed on 3 June by an invitation-only workshop designed to explore the feasibility of DRIVE-AB's five preliminary reward models. The consortium is now re-evaluating these models in the context of the feedback received. A full conference summary outlining the key messages and outcomes of the meeting in more detail will be published in the coming months and will be available here.

**New colistin-resistant gene, mcr-2, and variant of mcr-1 gene identified.**

A team of researchers in Belgium has discovered a new gene, **distinct from mcr-1**, conferring colistin resistance in *Escherichia coli* samples taken from cows and pigs. The gene, called mcr-2, was detected on plasmids from 3 of 10 colistin-resistant *E. coli* isolates taken from calves and piglets. The mcr-1 and mcr-2 genes enable bacteria to disable colistin, a last-resort antibiotic that is used to treat highly resistant bacteria. It has raised alarm among public health officials as there is the potential for rapid spread in both animals and humans. Screening for mcr-1 in colistin-resistant enterobacteriacae has recently been proposed by some public health officials. (Click here for recent recommendations in the PAHO Region). The researchers are calling for immediate inclusion of mcr-2 in ongoing molecular epidemiologic surveillance of colistin-resistant pathogens in the food supply and in humans. Click here to read the report.

Meanwhile, Italian researchers say they have detected a variant of the mcr-1 gene, which they are calling mcr-1,2, in *Klebsiella pneumoniae*. More information here. While mcr-1 has been found to cause invasive infection in humans, so far no deaths have been reported. Once mcr-1 is included in routine screening, similar reports for that gene may be seen in the future. In terms of severity of disease, it is currently too early to say whether one gene is more virulent than the other. The public health implication is that increased colistin resistance may lead to an increase in the burden of disease.

The discovery of mcr-2 emphasizes the need to restrict the use of colistin, in all settings, to infections caused by colistin-resistant enterobacteriacae (a family of germs that are difficult to treat because they have high levels of resistance to antibiotics) in the absence of other treatment options. It also highlights the necessity of strengthening infection prevention and control measures in all settings, and particularly in high selection pressure settings such as healthcare facilities. Whenever possible, screening for colistin resistance should be carried out in colistin-resistant enterobacteriacae-causing infections to inform treatment.
Resources

- Antimicrobial resistance: aide-memoire. Click [here](#).
- Antimicrobial resistance for policy makers. Click [here](#).
- Antimicrobial resistance: A manual for developing national action plans and supporting documents and tools. Click [here](#).
- Library of national action plans. Click [here](#).
- Global Antimicrobial Resistance Surveillance System (GLASS). For information on criteria and procedures for enrolment in GLASS and for the GLASS manual, click [here](#).
- For information on infection prevention and antimicrobial resistance, click [here](#).

### UPCOMING MEETINGS/EVENTS

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<th>Date</th>
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<tr>
<td>Aug 31-Sept 2</td>
<td>Developing, Strengthening &amp; Implementing AMR NAPs. Induction workshop for SEARO national focal points. Contact <a href="mailto:visanu.tha@mahidol.ac.th">visanu.tha@mahidol.ac.th</a></td>
<td>Bangkok, Thailand</td>
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<td>Sept 1</td>
<td>AMR Research and Innovation in Africa: Addressing regional priorities. GARD</td>
<td>Cape Town, South Africa</td>
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<td>Sept 4-5</td>
<td>G20 Leaders Summit</td>
<td>Hangzhou, China</td>
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<td>Sept 8-9</td>
<td>World Anti-Microbial Resistance Congress. Information <a href="#">here</a>.</td>
<td>Washington DC, USA</td>
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<td>Sept 11-12</td>
<td>G7 follow-up Health Ministers meeting</td>
<td>Kobe, Japan</td>
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<td>Sept 20-26</td>
<td>UN General Assembly - High Level Week</td>
<td>UN New York, USA</td>
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<td>Sept 21</td>
<td>UNGA High Level meeting on AMR</td>
<td>UN New York, USA</td>
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<td>Oct 9-11</td>
<td>World Health Summit (WHS)</td>
<td>Berlin, Germany</td>
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<td>Oct 10-11</td>
<td>Global Expert Network on innovations in antimicrobial drug research and development (during WHS)</td>
<td>Berlin, Germany</td>
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<td>Oct 25</td>
<td>Trilateral WIPO, WHO, WTO symposium on AMR</td>
<td>Geneva, Switzerland</td>
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<td>Nov 3</td>
<td>Global “One Health Day”. Information <a href="#">here</a></td>
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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 contents rests with the AMR Secretariat Director: Marc Sprenger. **Newsletter editor:** Breeda Hickey.

**Members of Technical Coordination Group**: Work stream leads HQ - Carmem Pessoa da Silva, Gilles Forte, Benedetta Allegranzi, Peter Beyer, Kate Medlicott, Awa Aidara-Kane, Martin Friede, Francis Moussy, and Karin Weyer; Yahaya Ali Ahmed, AFRO; Pilar Ramon Pardo, AMRO; Ali Mafi, EMRO; Danilo Lo Fo Wong, EURO; Sirenda Vong, SEARO; Sarah Paulin, WPRO (interim).