

Global Antibiotic Resistance Partnership



Day 1: Observations

GARP-SA Inaugural Meeting

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RFF

9 February 2010



Surveillance

- NASF
- Private hospital data collection
- GERMS-SA
 - TRAC-SOUTH AFRICA (fungal infections)
- STI Surveillance—NICD
- National Antimicrobial Resistance Surveillance System – NARSS—NICD
- KZN activities
- Veterinary surveillance

SURVEILLANCE—THE OPPORTUNITY

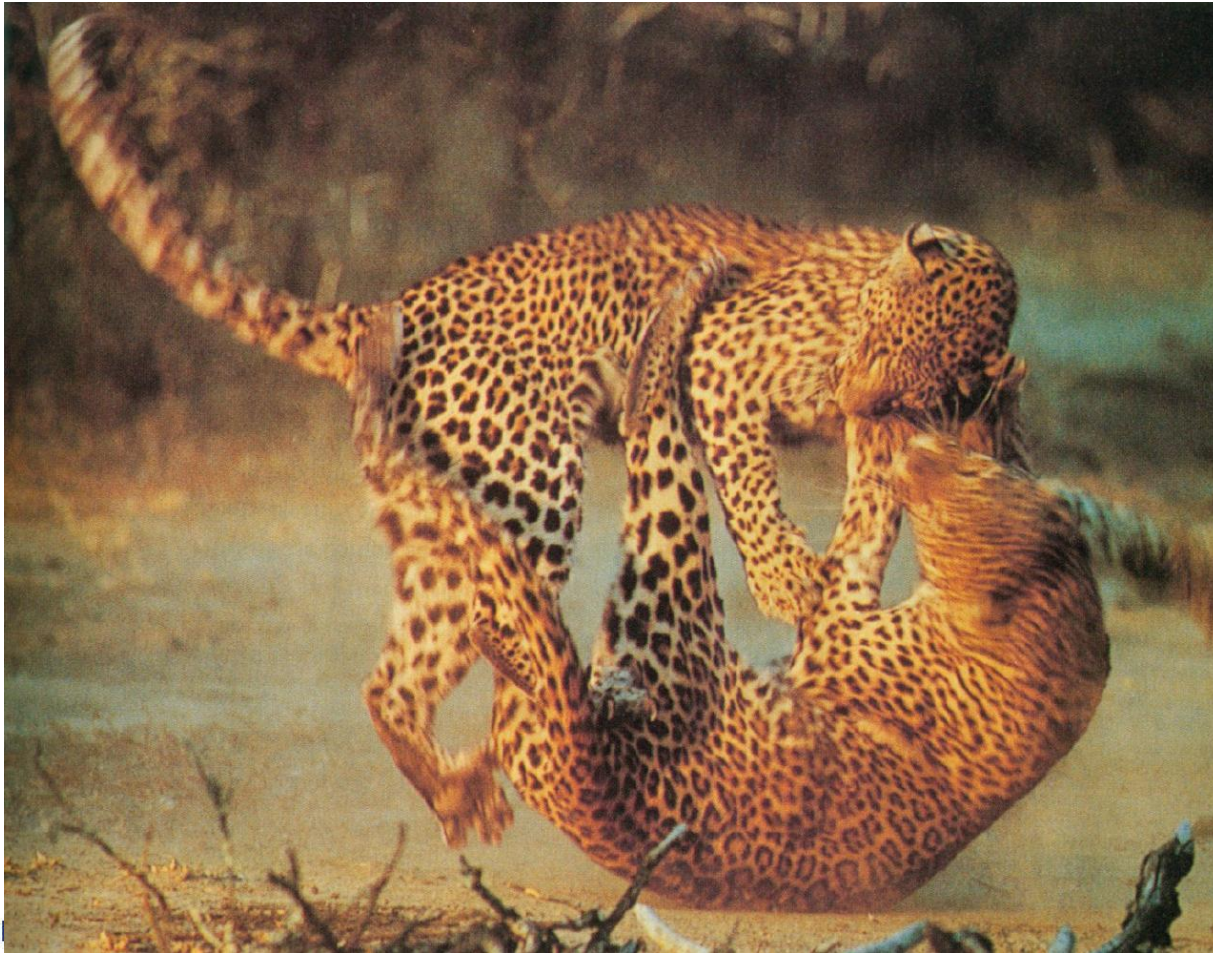
- CONSOLIDATION, COORDINATION
 - Definitions
 - Methods
 - Indicator organisms
 - Sampling, etc.

- How does this happen? What is the mechanism and who are the players?

Resistance

- Enough to worry about, but the details matter and vary for each drug/bug, and importantly, by urban, peri-urban, rural location. [As elsewhere, highest in urban referral hospitals.]
- Calls for tailored guidelines, EDL
- Information needs? How does surveillance feed in most usefully?

Ethical dilemma



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Who is responsible for antibiotic effectiveness?

- Stewardship—no one has taken responsibility



The Veterinary Side



Veterinary ab use

- About 5X the amount of antibiotics used in humans are used in animals
- Chickens and pigs are the biggest consumers (as is the case in other countries)
- Particular concerns: quinolones, vancomycin
- What is the relationship between use in animals and antibiotic resistance in people?

AMR cycle



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Aquaculture

- No worries! (but pass on the abalone)



Trends in antibiotic sales

- For Sanofi-Aventis (top antibiotic seller in SA), increase of 27% from 2008-2009 (includes both price and volume and product mix)

Reducing demand for antibiotics

- Topicals?
- Point of care diagnostics

Global and local/regional problem (and solutions)

- Global: antibiotic supply, resistance in some cases has cross-border consequences (some clones spread widely), similar solutions in many places
- Local/regional: rapid change in antibiotic resistance profiles in certain cases (even if not understood)—France, Netherlands, Belgium and Kilifi, Kenya

Clonal spread of *S. pneumoniae* 23F



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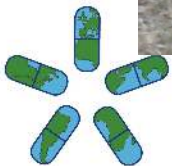
Facts and conclusions

- Resistance is biologically inevitable and its magnitude is proportional to the access of the organism to the antimicrobial.
- Increasing access to care will increase resistance.
- Developing countries are at great risk given their lack of capacity to detect resistance and to control its ascent.
- Unequal access: not enough and too much

GARP and the way forward

- Develop the evidence base for policy action on antibiotic resistance
- Identify policy opportunities where research dissemination, advocacy, and information can have the greatest impact in slowing the development and spread of resistance.

Dogs, sheep, cheetahs (or silver, antibiotics, bacteria)



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Meeting reimbursements

Mail to:

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Resources for the Future

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ORIGINAL RECEIPTS

For SA participants, reimbursement will come through Dr. Duse's office



DINNER TUESDAY 9 FEB
RIVER VIEW DECK

TIME CHANGE: 7:30 pm
[not 6:30]

