

CDDEP researchers label lack of antibiotics access major health hurdle worldwide

Monday, April 15, 2019 by [Chris Galford](#)

A recent report from the Center for Disease Dynamics, Economics & Policy (CDDEP) lays out present problems in global access to antibiotics.

The majority of the world's annual 5.7 million antibiotic-treatable deaths occur in low- and middle-income countries. The mortality burden from treatable bacterial infections far outweighs the estimated annual 700,000 deaths from antibiotic-resistant infections.

Of 21 new antibiotics that reached markets between 1999 and 2014, less than five were registered in sub-Saharan Africa. So while cures existed, the people who needed them most had no means of getting them.

“Lack of access to antibiotics kills more people currently than does antibiotic resistance, but we have not had a good handle on why these barriers are created,” CDDEP Director Ramanan Laxminarayan, a co-author of the report, said. “The findings of the report show that even after the discovery of a new antibiotic, regulatory hurdles and substandard health facilities delay or altogether prevent widespread market entry and drug availability.”

In the new report, “Access Barriers to Antibiotics,” researchers conducted interviews with stakeholders in Uganda, India, and Germany, and literature reviews. Researchers concluded that many low and middle income nations boast substandard health facilities that are understaffed with those trained in administering antibiotics. Matters are further complicated by weak drug supply chains which fail to make necessary drugs available. Cost of drugs and a lack of oversight on these manufacturing and supply chains also hurt the quality of drugs available and led to falsified medicines — something that leads to additional deaths.

The report also included researcher recommendations on how to start addressing this problem, including encouragement of R&D for new or improved antibiotics, diagnostic tests, vaccines and antibiotic alternatives for bacterial infections and the registration of antibiotics in more countries. Further recommendations included the development of

national treatment guidelines for antimicrobial use, innovating funding solutions for antibiotics, promoting quality assurance and boosted regulatory capacity, and encouragement of local manufacturing to cut costs.