Antimicrobial Resistance

Antimicrobial Stewardship

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Antimicrobial Stewardship

Definition

WHO defines Antimicrobial Stewardship (AMS) as a coherent set of integrated actions which promote the responsible and appropriate use of antimicrobials to help improve patient outcomes across the continuum of care.

Responsible and appropriate use of antimicrobials includes prescribing only when needed, selection of the optimal drug regimen, drug dosing, route of administration and duration of treatment following proper and optimized diagnosis.

These actions are complemented by access to affordable and quality antimicrobials and interventions that prevent healthcare associated infections and community-acquired infections including the implementation of core components of infection prevention and control, enhancing water, sanitation and hygiene, and optimizing vaccination coverage.
Antimicrobial Stewardship

WHO Policy Guidance on Integrated Antimicrobial Stewardship Activities

https://www.who.int/publications/i/item/9789240025530

https://apps.who.int/iris/handle/10665/329404
The policy guidance provides guidance on how to implement comprehensive and integrated national antimicrobial stewardship activities as a set of evidence-based and pragmatic considerations and is published and available in 6 UN languages.

6 core components to support step-wise implementation:

- Identify national core elements
- Identify facility core elements
- Plan the AMS programme
- Perform AMS interventions
- Assess AMS interventions
- Facilitate education and training

Online training course hosted on OpenWHO platform

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Provides a programmatic approach to promote responsible use of antimicrobials at health-care facility level

- **Aim:** preserve effectiveness of existing antimicrobials and increase access to essential antimicrobials
- **6 core components** to support step-wise implementation:
  - Identify national core elements
  - Identify facility core elements
  - Plan the AMS programme
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2021 AWaRe classification
https://www.who.int/publications/i/item/2021-aware-classification

WHO model list of essential medicines - 22nd list, 2021
https://www.who.int/publications/i/item/WHO-MHP-HPS-EML-2021.02
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Basic AMS interventions

1. Educate prescribers and health personnel involved in antibiotic use (see Chapter 7).
2. Develop and update a standardized medical record and medical chart to ensure that information on patients’ medicines is all in one place (see Annex VI).
3. Review whether patients who receive antibiotic treatment have written indications.
4. Review antibiotic treatment for patients prescribed three or more broad-spectrum antibiotics.
5. Review the dose of antibiotics prescribed.
6. Review surgical antibiotic prophylaxis where it is prescribed for >24 hours and where a single dose is appropriate.
7. Develop local guidelines for surgical prophylaxis and treatment of common clinical conditions such as community-acquired pneumonia, UTIs, skin and soft tissue infection (SSIs), as well as common health-care-associated infections such as pneumonia, UTIs and catheter-related infections.
8. Work to ensure leadership and identify expertise in infection management.
9. Improve the supply and management of medicines, including essential antibiotics, e.g. by establishing a drug and therapeutics committee.
10. Work to establish basic microbiology laboratory facilities.
11. Work to establish regular surveillance activities (e.g. AMR, AMC, health-care-associated infections).
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Thank you!