

Report of the ReAct South East Asia Regional Meeting: Community, Hospital and Policy Interventions to Manage and Control Antibiotic Resistance

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ReAct South East Asia (ReAct SEA) recently brought together 35 participants from the region to a meeting in Penang, to discuss community, health and policy interventions to manage and control antibiotic resistance (ABR). From 21 – 23 November 2014, scientists, doctors, researchers, heads of departments from ministries of health and hospitals as well as civil society representatives from Indonesia, Malaysia, Philippines, Singapore, Thailand, Timor-Leste and Vietnam spent two and a half days sharing experiences, and learning from each other successful interventions for adaption and adoption in their respective country settings.

In the opening plenary session on Global/Regional Landscapes, Dr Anna Zorzet, Manager and Scientific Officer of ReAct gave an overview of ReAct's work at its four regional offices and key global processes on AMR. From action initiated by ReAct at Cuenca, Ecuador in June 2008 through the Cuenca Declaration on AMR, to a high level expert meeting jointly organized by ReAct and the Dag Hammarskjold Foundation in Sweden in June 2014, to a Rally on Antibiotic Awareness in Jakarta, Indonesia in March 2014 with civil society partnership, to policy dialogues with the White House, WHO, WTO and WIPO in an advisory capacity to the more recent formation of a ReAct Africa AMR node in April 2014 in Nairobi, Anna shared the extensive work being carried out by ReAct offices around the world. She informed on the three main areas of ReAct's work: Generating and Translating Evidence (GATE), Strategic Policy (SP) and Engagement, Empowerment and network Extension (EEE). She spoke about the formation of the Antibiotics Resistance Coalition or ARC, a multisector grouping of researchers, academia, animal and human health advocates as well as civil society, as a significant development for the community-policy-research interface.

Anna also informed on key global processes on AMR: WHO's Global Action Plan (GAP) and meetings that have occurred globally since the adoption of Resolution WHA 67.25 on AMR at the 67th WHA in May 2014 where GAP was first formulated, the Global Health Security Agenda initiated by the US as well as key future meetings on AMR.

Associate Professor Dr Mohamed Azmi Hassali, Deputy Dean (Student Affairs and Networking), School of Pharmacy, USM spoke about engaging civil society organizations for social mobilization, health education and communication. He discussed the importance of civil society engagement to address AMR, covering principles of community engagement and the experience of the Department of Social and Administrative Pharmacy (DSAP) at USM in one such engagement. DSAP carried out a baseline survey to explore knowledge and attitudes on AB use among a low and middle-income urban community in a district in Penang and found that AB were predominantly being used to treat viral infections with three out of four respondents agreeing that ABs would reduce fever. Close to 70% of respondents believed that AB were not implicated in resistance. Following this, Azmi informed that, interventions in the form of educational resources were prepared and distributed during a training workshop for the first phase of the project. During the second phase, focussed group discussions were held with community members to monitor progress, gather feedback and prepare future strategies. According to Azmi, to date the project has successfully expanded engagement to include other civil society groups as well as the state and local governments.

The second plenary session on community level interventions saw six presentations from a mix of civil society groups and university-based researchers from Indonesia, Malaysia and Thailand. Dr Ardiana Kusumaningrum from Yaysan OrangTua Peduli, Indonesia informed on the Smart Partnership of Parents and Physicians initiative focussing on the Smart Use of Antibiotics or SUA programme. For the SUA campaign, YOP produced various educational resources including reading materials and T-shirts and a series of activities including a fun walk, a national health day event on SUA , talk shows and media briefings with extensive coverage and reporting.

Ms Rabiatul Salmi from DSAP, USM presented on “Prescribing in upper respiratory tract infections in primary case practice in Kota Setar District” while Ms Lyna Irawati, also from DSAP shared her research on “Development and assessment of an educational programme to promote the responsible use of antibiotics among community residents in Penang State, Malaysia.”

ReAct’s Mr Satya Sivaraman, spoke about community tools to tackle AMR including knowledge on how to support communities in Asia, Africa and Latin America to reduce ABR through their own initiatives.

The team from Thailand comprising Ms Kadasinee , Ms Mattana and Ms Duangdon representing the Mauklek District Health Office, Saraburi, the Sustainable Alternative Development Association and the Family Network Foundation respectively, made a joint presentation on the Antibiotic Smart Use Programme in Bangkok and Chiang Mai, Thailand. Project activities carried out in Bangkok and Chiangmai ranged from 4 training workshops for project leaders to disseminate antibiotic smart use messages through parent education during School Open Days and collaboration with local government and two district hospitals. Additional activities involved radio spots with the Family Radio Programme. The ASU programme has seen some good progress with regards to behaviour change in antibiotic use in the communities that were engaged. For instance in the Hang Dong district in Chiang Mai, the team recorded higher rate of self-care behaviour before consuming antibiotics/medicines, less pressure on children to consume antibiotics/medicines for minor illnesses, more reading of instructions on medicines consumption and emphasis on good nutrition for preventive health.

Mr Kiatsik Chatdee, Coordinator at the Institute of Sustainable Agriculture Community, Thailand gave a comprehensive presentation on the use of antibiotics in contract farming in Thailand and the grave injustices that contract farmers contend with in their interactions with big business. These include unfair contracts, no prior alert before sudden changes to contracts, high prices of livestock, feed and medicines, lack of information and no legal mechanisms to protect the rights of the farmer. The Institute aims to provide alternative farming options that focus on good, clean and green food choices – ‘Good food is medicine, good environment is vitamin and good mind is a cause of good body.’ It also promotes alternative marketing options for farmers such as green markets, local networks and social entrepreneurship.

At the third plenary session on hospital level interventions, Dr Behzad Nadjm from the Oxford University Clinical Research Unit based at the National Hospital of Tropical Diseases in Hanoi, Vietnam reported on a VINARES (**V**ietnam **R**esistance project) project on High prevalence of Healthcare Associated Infections (HAI) caused by gram negative carbapenem resistant strains in 16 Vietnam hospital paediatric ICUs. The project aims at describing aetiology and resistance pattern as well as antibiotic use in order to create evidence enabling improved treatment guidelines for severe

infections and infection control. The project's main findings show that HAI occurred in about a third of adult patients of which ¾ were pulmonary infections; gram negatives were found to predominate of which ¼ were *A baumannii*; there was high levels of AMR of which 80% were carbapenem resistant *A baumannii* and 5 – 10% Enterobacteriaceae carbapenem resistant.

Dr Nithima Soompradith, Senior Pharmacist at the Food and Drug Administration and Assistant Director at the International Health Policy Programme, Ministry of Public Health, Thailand informed on the 'Global Movement on AMR at a glance'. She gave an overview of international organizations engaged in AMR such as WHO, FAO and OIE with mention of the Global Action Plan, as well as the Global Health Security Agenda driven by the US, Foreign Policy and Global Health and the Antibiotic Resistance Coalition. Other noteworthy initiatives were the Jaipur Declaration of 2011, the SEAR Strategy on Prevention and Containment of AMR 2010 – 2015 and the ASEAN Post 2015 Health Development Agenda.

Dr Andrea Kwa, Senior Principal Researcher, Clinical Pharmacist and Director of Infectious Disease Pharmacy Residency at Singapore General Hospital as well as the Team Leader of the Antimicrobial Stewardship Programme Singapore shared on 'Patient-centred outcomes for measurement of ASP performance' or 'Point Prevalence Survey' while Dr Helmi Sulaiman, the Infectious Diseases Registrar at the Faculty of Medicine, University Malaya Medical Centre spoke on 'PPS to measure antibiotic use: data on ASP in UMMC'.

The fourth plenary session on policy level interventions on the second day of the meeting, saw presentations from Indonesia, Philippines and Thailand. Dr Purnamawati from Yayasan Orang Tua Peduli, informed on the work of Indonesia's National Committee on Antibiotic Resistance Control Programme. Five main areas of concern were noted: awareness; information on the magnitude of the problem; economic impact; rational use of antimicrobials; and preventing infection. Various activities have been conducted to improve national capacity for AMR such as advocacy on the use of the national drug formulary within the health workforce and workshops on rational use of antimicrobials at Primary Health Care centres and universities at both district and provincial levels.

In presenting Philippines National Strategic Plan of Action to Combat AMR, Ms Joyce Anne Ceria, Head of Rational Use of Medicines Programme at the Department of Health, Philippines, covered the background to the plan including a country situational analysis on AMR, the National Antimicrobial Stewardship Programme and public and consumer advocacy including an AMR Pledge Challenge. Philippines is revamping its National Formulary and expects the updated version to be available to all health care centres in the very near future. A National AMR surveillance Programme is in place and almost all regions (14 out of 17) in the country are represented in the programme. Of the 22 sentinel laboratories, 20 or 91% are from government institutions while 2 or 9% are housed in private hospitals.

Dr Niyada Kiatying-Angsulee, Chair of the Social Pharmacy Research Unit, Faculty of Pharmaceutical Sciences; Director, Social Research Institute; Manager, Drug System Monitoring and Development Programme, Chulalongkorn University, Thailand spoke on policy directions on AMR in Thailand, covering roles of all stakeholders and top down and bottom up approaches for most the efficient and sustainable national intervention initiatives on AMR. She shared the successes of the Antibiotic Smart Use Programme of Thailand (which is increasingly being used as a model by many developing countries), and the outcomes of the recently convened ASEAN Antibiotics Awareness Day event held

in Bangkok from 18 – 19 November 2014. Thailand's strategy is based on the *Triangle That Moves the Mountain* concept with a 3 point focus on knowledge, Policy Advocacy and Social Movement. Its Strategic Plan for 2015 – 2017, will encompass integrations across issues/settings, expansion of beneficiaries through knowledge, sustainability through capacity building, innovation and aging society preparedness.

In an impromptu session, Shila Kaur representing HAIAP and Evelyne Hong representing TWN/CAP were called upon to share experiences on ABR within their respective organizations. Rational use of medicines has been the mainstay of HAIAP's work; Shila informed that in 1993 HAIAP was requested by the Beijing Children's Hospital to assist with an education and awareness workshop aimed at changing antibiotic prescribing practices of paediatricians and doctors. The use of antibiotics in paediatric practice was at an all time high at the hospital and senior paediatricians were concerned that most of the prescribing was being carried out irrationally. Twenty years on, the situation has gone from bad to worse – China's rivers are contaminated with resistant bacteria and the true status of AMR is unclear. Shila spoke about the international response to AMR and the lapses in effective leadership on AMR by WHO, FAO and OIE in the past. She provided some background on WHO resolutions on AMR noting that international attention was now focussed on the roll out of WHO's Global Action Plan next year at the 68th World Health Assembly. She informed that TWN-HAIAP-CAP had carried out two research studies on the Use of Antibiotics and ABR in Animal Farming and Humans in Malaysia, which had been submitted as memoranda to the Ministries of Health and Agriculture and have since formed the basis for dialogue with the MOH. Joint collaborative activities are currently being planned with the MOH on taking forward the work on AMR. These in fact will feed into the country's national action plan on AMR. She offered HAI's expertise on drug pricing, marketing and promotional practices of pharmaceutical companies and international trade related agreements as areas for collaboration on AMR with participants.

Evelyne Hong referred to CAP's research on about 14 drugs in the 1980s which were published as a series of reports and sent as memoranda to the government. Based on the list of drugs that had been banned in developed countries, these drug reports became the basis for advocacy and action by CAP and resulted in a similar ban/removal from use in Malaysia. Included in this list were antibiotics such as chloramphenicol and tetracycline. She compared the marketing and promotional practices used by drug companies in developed and developing countries and informed that in developing countries there are more indications for the use of a drug compared to developed countries. The lure of benefits such as free gifts and trips abroad to doctors for prescribing drugs including antibiotics, were factors that were driving sales and profits of drug companies.

Dr David Lye, Senior Consultant, Department of Infectious Diseases; Head, Antimicrobial Stewardship Program, Tan Tock Seng Hospital, Singapore and Dr Danina Coelho, Infectious Disease Specialist, Hospital Nacional Guido Valadares, Dili, Timor Leste were given a slot to share experiences from Timor Leste and Singapore as a basis for comparison on action on AMR. In a joint presentation on 'Antibiotic use in hospitals by case vignettes in resource limited and rich settings, participants heard about actual cases of social and hospital-based drivers that influence medical decision-making on antibiotic prescriptions.

The final session for the second day was devoted to a Workshop on ReAct's Resource Centre and Tool Box. Facilitated by Bronwen Holloway and Satya Sivaraman, this 3 hour workshop was aimed at

getting participants to feedback on ReAct's Resource Centre Tool Box on AMR. ReAct currently has an online Resource Centre and Tool Box to assist network partners in taking action on ABR. At this workshop, participants were asked to use a series of guidance questions to assess, evaluate and feedback on the usefulness of these resources, online. There was general agreement from participants that this was a useful exercise and that the online availability of these resources was valuable to partners.

The meeting concluded with the adoption of a Statement (entitled "Statement from the ReAct South East Asia Regional Meeting: Community, Hospital and Policy Interventions to Manage and Control Antibiotic Resistance, 21-23 November, Penang, Malaysia.") on 23 November 2014.