Summary of Breakout Session Discussion
Session 1: Appropriate Therapeutic Use of Antimicrobials & Prevention of Drug-Resistant Infections in Human Medicine

Moderators: Jean Patel (CDC) and Dominique Monnet (ECDC)

Let’s Keep Antibiotics Effective!
New: Develop guidance for assessing appropriate antibiotic use

• **Issue:** Public health authorities and academic researchers are conducting studies to measure appropriate antibiotic use. TATFAR implementers will compile recommendations for assessment that have been developed and applied as a global resource.
New: Publish a review of antibiotic reduction goals from the TATFAR partner countries

• **Issue:** The TATFAR partner countries are developing antibiotic use reduction goals. Similar strategies would be useful elsewhere. These country-specific efforts will be summarized for the purpose of developing an information resource for other countries interested in a similar activity.
Continue the coordination of campaigns to promote appropriate antibiotic use in human medicine.

**Issue:** The EU, United States, Canada, and other countries have successfully coordinated antibiotic awareness campaigns. These campaigns have been very important for focusing the attention of antimicrobial prescribers and consumers of the need to use this medication judiciously. WHO is committed to making this a world-wide observance. Experts from TATFAR will work with WHO to develop and implement this world-wide observance.
Consultation & collaboration on point-prevalence survey for HAI infections and assessment of antimicrobial use.

- ECDC and CDC have conducted point prevalence studies of HAI infections which include collection of antimicrobial resistance data. Study protocols have been harmonized to the extent possible. Both agencies are planning for the next phase of testing which will include protocol enhancements. TATFAR implementers will continue to work together with the aim of developing robust protocols that can potentially be implemented in other parts of the world.
Develop a common strategy for sharing and analyzing bacterial resistance patterns for pathogens identified as urgent and serious threats.

- Public health authorities conducting surveillance have developed web-based tools to query antimicrobial resistance surveillance data and these efforts will continue to expand. TATFAR implementers will work to develop these tools with the aim of having comparable methods available to the public to query the most recent surveillance data.
Develop a rapid alert system

• Use this system to communicate new resistance findings
  • New or unusual resistance (including resistance mechanisms)
  • Important trends
  • Pre-publication results for early action
  • Expand and update the CDC-ECDC Terms of Reference
• Reported by technical level rather than national authorities
• Preferably use an existing system
• Ultimately WHO-led system shared by national public health programs

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Harmonize surveillance interpretive criteria for WHO GLASS

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<th>Escherichia coli and Klebsiella pneumoniae</th>
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<th>CLSI</th>
<th>EUCAST</th>
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New: Coordinate guidance for detection of outbreaks or concerning resistance trends and appropriate response.

• **Issue:** Hospitals and public health authorities need to know when antimicrobial resistance findings warrant enhanced prevention measures. They also need tools for preventing the spread of resistant infections. TATFAR implementers will work together to develop guidance for identifying outbreaks and for assembling tool for prevention.

• **Priority focus:** CRE, and specifically strategies to detect asymptomatic colonization in inpatients, healthcare workers, returning travellers.
New: Review of health systems incentives/disincentives that affect compliance with infection control and prudent antibiotic use

• **Issue:** Characteristics of health systems influence compliance with infection control and antibiotic use, in the community and in hospitals. Regulators are considering these incentives/disincentives and there is a need to share experience and ideas for interventions.

• **Implementers:** health authorities (US CMS, DG SANTE, Health authorities in EU members States, Canada and Norway)
New: TATFAR assessment of AMR risks, with projection estimates for the next 10 years

• **Issue:** The US risk assessment has been very useful. US and EU are about to perform the point-prevalence surveys, which will generate new data on the burden of AMR in the US and the EU.

• **Implementers:** CDC, ECDC, Canada, Norway, and other stakeholders
Other Ideas?

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Session 2: Appropriate Therapeutic Use & Prevention of Drug-Resistant Infections in Veterinary Medicine

Moderators: David Mackay (EMA) and Craig Lewis (FDA)

Let’s Keep Antibiotics Effective!
Transmission: Research, Policy

• Knowledge gaps
  • Can’t wait for results before taking measures; measure at same time as interventions
  • Recognize two-way transmission (human to animal)
  • Role of other risk pathways (environment, pets)

• Determining success of control measures (e.g., optimizing veterinary use of antibiotics)
  • Measuring use too simple on its own
  • Also need to measure resistance (humans, animals)

• Cooperation:
  • Local/regional/national/international
  • Cross-disciplines (One-Health)
  • Can start with voluntary measures; assess and amend
Surveillance: Collection, Analysis

• Key role of surveillance as evidence rather than opinion
  • Source attribution; assessment of success of intervention measures

• Challenges
  • Volume of data
  • Not harmonized
  • Analytic methods: how to relate data on use and resistance?
  • Difficult to distil to easily digested messages…

• Opportunities
  • Use harmonized methodology; strong drive to standardize data collection
  • Focus on particularly important antibiotics
  • Recognize animal species has significant impact on relative risk to man (therefore a priority for surveillance)
  • Risk-based approaches

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Stewardship: Definition, Communication

• Best practices
  • Identify agreement within TATFAR; advocate in other regions?

• Messaging
  • Need to understand audience, local circumstances; and modify approaches accordingly (targeted messaging)
  • Being involved in process helps identify messages
  • Identify science communications specialists
Session 3: Strategies for Improving the Pipeline of New Antimicrobial Drugs

Moderators: Arjon van Hengel (DG RTC) and Jane Knisely (NIH)
Session 3: Strategies for Improving the Pipeline of New Antimicrobial Drugs

• Potential Areas for Future Activities
  1. Collaborate on clinical trials
  2. Develop regulatory pathways for alternative therapies
  3. Continue to exchange information for incentives on drug development
Thank You!

Please enjoy a 30-minute coffee break.

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