# Stop AMR Global Media Monitor

16 - 29 May 2020

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Webinar on AMR – Addressing the Antibiotic Market Failure, 4 June 2020 at 12:00-13:00 CET

You are invited to join the upcoming Parliament Magazine/PA International multi-stakeholder webinar looking at the requirement for a new business model for the development, production and sale of new antibiotics. The webinar takes place at 12:00-13:00 CET on Thursday 4 June 2020.

Click here for the agenda

**ABOUT THE WEBINAR**

COVID-19 has demonstrated Europe's lack of preparedness for major pandemics and has highlighted the bloc's heavy dependence on China and India for many pharmaceuticals and other medical supplies. With EU-China relations set to be a key German EU presidency priority in the coming months, we test the scope for cooperation and the requirement to build European facilities particularly related to preventing an outbreak of multiple or totally resistant bacteria such as e-coli and sexually transmittable bacteria.

The UK's top adviser on antimicrobial resistance, former Conservative Party Finance Secretary and Goldman Sachs banker, Lord Jim O'Neill, will table new solutions. Among the key arguments: our market and our system demonstrate fatal flaws that could cost more lives than cancer or car accidents: 300 million by 2050.

German S&D group MEP Tiemo Wölken, a vice-chair of the MEP Interest Group on AMR, and EPP group MEP Peter Liese, a member of the ENVI Committee, will discuss the European Parliament's most critical concerns and options.

Scientific options will be delivered by Dr Jon de Vlieger from the European Lead Factory/Lygature Foundation, in the Netherlands, Dr Marc Gitzinger, Vice-President of the BEAM (Biotech companies in Europe combating AntiMicrobial Resistance) Alliance and CEO of BioVersys, and Dr Jean-Paul Pirnay of the Queen Astrid Military Hospital, Belgium.

**Click here to register**

Antibiotic use rising for sick kids in low-resource nations

A new research discovered an increase in antibiotic use in children below 5 years old in low- and middle-income countries. The biggest increase has been observed in the poorest ones.

Researchers analysed data from 73 countries and emphasized an average augmentation of 17% between 2005 and 2017. Africa and South-East Asia showed an increase of 34% in antibiotic use in sick kids during the considered period, although these same countries had the lowest overall antibiotic use in pre-schoolers compared with other LMICs.

Usually, most of the assessments around antibiotic consumption rely on pharmaceutical sales data. But those data are not very representative in most of LMICs, giving stronger weight to household surveys of childhood antibiotics use.

Source: CIDRAP, 26 May 2020

Study finds some reductions in community antibiotic resistant infections and dispensing

A new study led by a team from the University of Bristol has found a reduction in overall and individual antibiotic dispensing between 2013 and 2016 after evaluating national primary care prescribing policy on community antibiotic resistant infection.
The researchers investigated the resistance of E *Coli* in community-acquired urinary infection cases between 2013 and 2016 from Bristol and the surrounding area.
The period of investigation was chosen as the NHS in 2014 introduced some incentive schemes to reduce antibiotic prescription.
The team found a significant correlation between the reduction of antibiotic dispensing and a reduction in community antibiotic resistant infections during the said period.

Source: EurekAlert!, 19 May 2020

Review finds test antibiotics unreliable for diagnosing TB

A joint research between the UK and Africa suggests that the common use of antibiotics to test whether an individual may have tuberculosis (TB) is unreliable. This conclusion fell after a systematic review and meta-analysis of multiple studies that approached the use of trial antibiotics as a diagnostic test in adults with TB symptoms. They discovered that the use of antibiotics poorly performed in ruling TB in or out of the suspected illnesses.
The authors call for a reconsideration of this method, recommended by the WHO since more than 30 years. "Despite more than 30 years of international guidelines and national algorithms promoting the trial of antibiotics for tuberculosis diagnosis, the small amount of data presented here on its diagnostic utility do not support the underlying rationale," the authors wrote in The Lancet Infectious Diseases.
Alongside that discovery, they suggest reducing the use of this technique to tackle at its basis the phenomenon of antibiotic resistance.

Source: CIDRAP, 20 May 2020

New technology can detect anti-virus antibody in 20 minutes

Researchers, while using a newly developed portable analyser to rapidly conduct on-site bio-tests, have managed to detect an anti-avian influenza virus antibody in blood serum within 20 minutes. By developing a suitable reagent, the analyser could be used to detect antibodies against SARS-CoV-2, the virus causing the deadly COVID-19.

Avian influenza infects poultry and rapid intervention is required to prevent humongous damages, leading to a constant need of prevention and surveillance. Prior to this analyser, a usual technique to detect the viral genome was to amplify DNA with PCR. But this method requires a considerable amount of time.

Source: Eurekalert!, 21 May 2020

Malaria drugs tied to risk of death, heart problems in COVID-19 patients

The largest study conducted so far on the use of the antimalarial drug hydroxychloroquine and chloroquine in the fight against COVID-19 in infected patients found that the drugs had no beneficial effects. Instead, some antagonists' effects were found. The use of the antimalarial drugs was associated with a higher risk of death and cardiac complications.

This study, published on the 22nd of May in "The Lancet", found that the use of those drugs, either alone or alongside other generally prescribed antibiotics, was associated with an increased risk of death of 34% to 45% compared to the control group, who did not receive the antimalarial drugs. More, treated patients were 2 to 5 times more likely to develop ventricular arrythmia.

Even if the results came from an observational and not a randomized study, the authors state that as it is not the only observational study, with others coming from different parts of the world, all showed so far no beneficial to negative effects in the treated patients.

Source: CIDRAP, 22 May 2020