



# English Speaking Africa Training Seminar for National Veterinary Products

Date: 05 –07 September 2023

Location: Malawi

## WHO Guidelines and Regional AMR Activities



Our time with  
**ANTIBIOTICS**  
is running out.

Antibiotics are in danger of losing their effectiveness due to misuse and overuse, and in many cases they aren't even needed.

Always seek the advice of a healthcare professional before taking antibiotics.

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**Antimicrobial Stewardship Consultant**  
**AMR Unit\_ ARD Cluster**  
**WHO/AFRO**

# Presentation outline



- ❖ Introduction / Background
- ❖ AFRO's AMR priority areas & support to member countries
- ❖ Mainstreaming of Antimicrobial Stewardship into Regulatory Inspections and Manufacturing of Medical Products

# AMR, a global crisis



- ❖ AMR is one of the leading causes of deaths globally
- ❖ Lancet report – in 2019, 4.95 million people who died suffered from drug-resistant bacterial infections.
- ❖ Globally, more people died due to reasons related to AMR than HIV/AIDS or malaria.



'It will be DEATH OF MAN' Sir Alexander Fleming WARNING over antibiotic resistance (Image: GETTY)

The largest burden occurred in the sub-Saharan Africa region

- Number of deaths attributable to AMR - 255,194 deaths
- Deaths associated - 1.07M

THE LANCET

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## Global burden of bacterial antimicrobial resistance in 2019: a systematic analysis

Antimicrobial Resistance Collaborators <sup>†</sup> • Show footnotes

Open Access • Published: January 19, 2022 • DOI: [https://doi.org/10.1016/S0140-6736\(21\)02724-0](https://doi.org/10.1016/S0140-6736(21)02724-0)



# WHO's 13th General Program of Work (GPW)



**Focused on the SDGs, UHC & WHO Impact Framework; By 2023**

- ❖ UHC coverage – **1 billion more** people with health coverage
- ❖ Health emergencies – **1 billion more** people made safer

- ❖  **Antibiotic resistance** – **1 billion** lives improved

## AMR Unit

Supports Member States to address AMR across key technical areas:



Strengthening Governance, Multisectoral partnership and Coordination



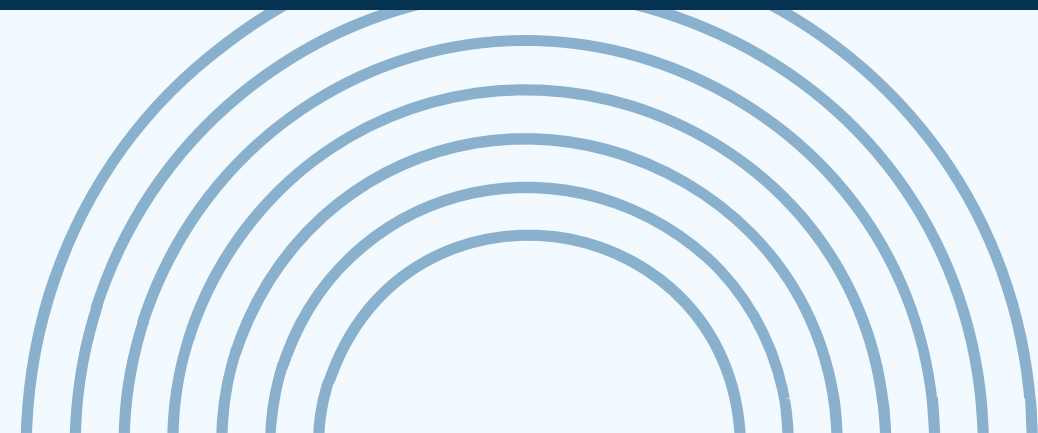
Raising awareness and understanding on AMR



Strengthening surveillance systems and laboratory capacity



Promoting optimal use of antimicrobials





# AFRO's AMR priority areas & support to member countries



# NAP Development & Implementation Progress



01

## One Health – AMR plans

- ❖ AMR NAP development – 46 countries with AMR NAPs of which 34 approved by national authorities
- ❖ 81% of NAPs linked to other National plans (NHSP, NAPHS etc)
- ❖ 6 countries trained on the AMR WHO Costing and budgeting tool & 4 have used the tool to cost NAP operational plans

01

## One Health – AMR plans

- ❖ Multisectoral Leadership and coordination tools for capacity building
- ❖ 42 countries (89%) responded to the 6th round TrACSS 2022
- ❖ Documentation of 2021 and 2022 TrACSS findings to inform country progress

**46 countries had developed AMR National Action Plans:** Angola; Benin; Botswana; Burkina Faso; Burundi; Cabo Verde; Cameroon; Chad; Comoros; Congo; Cote d'Ivoire; DRC; Equatorial Guinea; Eswatini; Eritrea; Ethiopia; Gabon; Ghana; Guinea; Kenya; Liberia; Madagascar; Mali; Malawi; Mauritania; Mauritius; Mozambique; Namibia; Niger; Nigeria; Rwanda; Senegal; Seychelles; Sierra Leone; South Africa; United Republic of Tanzania; Togo; Uganda; Zambia and, Zimbabwe

**34 of which are approved by national authorities:** Burundi, Cameroon; Chad; Comoros; Congo, DRC; Equatorial Guinea; Eritrea; Eswatini; Ethiopia; Gabon; Ghana; Guinea; Kenya; Liberia; Madagascar; Malawi; Mali; Mauritius; Mozambique; Namibia; Nigeria; Sierra Leone; Rwanda; Senegal; South Africa; United Republic of Tanzania; Togo; Uganda; Zambia and, Zimbabwe

# Awareness & Education



02

- ❖ DRASA Pilot Project producing AMR ambassadors who will be positive change agents in their families, among their peers and communities at large.

- ❖ AMR Education and Awareness Regional Webinar series—Over 19 countries capacitated in packaging and effective communication

- ❖ 170 regulators trained to mainstream AMR into regulatory & manufacturing product inspections

02

- ❖ Regional Education and Awareness Status Report for the WHO Afro Region completed – Targeted for release during WAAW

- ❖ Quadripartite, ACDC & AU-IBAR Joint commemoration of World Antimicrobial Awareness Week at the continental (2019, 2020, 2021 and 2022)

# WAAW Commemoration





# DRASA AMR Awareness Pilot Project



# Surveillance

03

- ❖ 79% (36) of countries enrolled in GLASS for standard AMR surveillance
- ❖ 28 enrolled into EQA for AMR Surveillance
- ❖ 13 countries reported AMC data in 2022

03

- ❖ 8 countries implementing integrated surveillance (ESBL Tricycle)
- ❖ Countries supported in development of policy briefs for use of AMR data for decision making

# Infection Prevention & Control

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- ❖ Capacity building-Training of trainers in IPC (7,000 +)
- ❖ Establish sub national IPC taskforces & committees in health facilities
- ❖ Guidance on linkage between IPC and AMR
- ❖ Implementation of standard precaution-  
Hand hygiene ,respiratory hygiene, waste reprocessing of reusable materials

# Optimal use of antimicrobials



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- ❖ 15 countries supported in point-prevalence surveys on antimicrobial use in hospitals & 13 countries capacities strengthened in monitoring antibiotic

- ❖ Mainstreaming AMR into Medical Products Manufacturing & regulatory Inspections

- ❖ Regional Antimicrobial Stewardship Webinar Series to build capacity for AMS implementation in the region

05

- ❖ **Capacity strengthening of experts from 33 member states: more than 270 national experts trained AwaRe Categorization**

- ❖ **27 (57.4%) countries have integrated Aware Categorization into the national essential medicines list/formulary**

- ❖ 8 (17%) countries have developed national antimicrobial stewardship implementation policy



# Mainstreaming of Antimicrobial Stewardship into Regulatory Inspections and Manufacturing of Medical Products



# Rationale



- ❖ The need to address AMR in line with the One Health approach necessitates the co-opting of NMRAs, regulators and manufacturers into strategies to mitigate the threat posed by AMR
- ❖ The NMRAs regulatory inspectors conduct Good Manufacturing Practice (GMP) inspections for medical products to verify that the producers adhere to global best standards for manufacturing of medical products.
- ❖ NEMAs enforce regulations for the protection of the environment from industrial waste, which in the case of pharmaceuticals may contain antimicrobial product residues that can result in AMR.

# Rationale



- ❖ As a result, NMRAs and EWPAs are well-positioned to spot any problems with the production procedures that might eventually lead to the development of AMR.
- ❖ Manufacturers have to address these AMR concerns under the guidance of national drug regulatory agencies and environmental protection agencies.



# Part 1: Training of regulatory inspectors & development of Technical Guidance & Aide-Mémoire





# Training



In 2020, Training of inspectors for medical products conducted & an **Aide-Mémoire** was developed

In 2021, a **technical guidance** that provides the framework for the use of the Aide-Mémoire was developed

Piloting done to determine the **suitability & applicability** of the technical guidance & aide-mémoire during regulatory inspections

# Piloting the Technical Guidance & Aide-Mémoire (Inspection Tool)



Piloting done by a team that consisted of:

- GMP inspectors
- Environment Management Authority inspectors
- AMR experts

at two pharmaceutical manufacturing facilities:

*Cipla Quality Chemical Industries Ltd., Uganda;*

*Yash Life Sciences Ltd., Zambia.*

# Pilot inspection of Effluent Treatment Plants



ETP in Uganda



WHO Team & Environmental inspectors during the pilot inspection in Uganda



ETP in Zambia

WHO Team & Environmental inspectors during the pilot inspection in Zambia

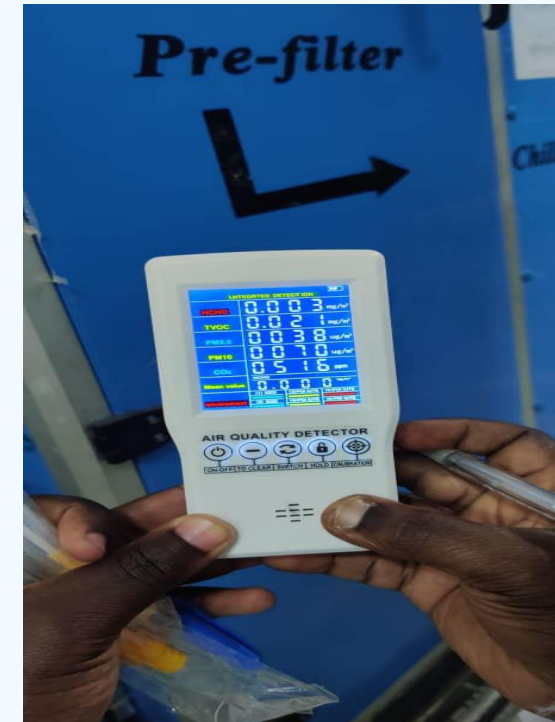
# Inspecting residue air discharged at the exhaust unit of an air handling unit



Air Handling Units, (point of dust/ antimicrobial product residue discharge at factories)



Environment inspector checking discharge residues in Uganda



Discharge limits and results – **currently not aligned to AMR limits**



## Part 2: Recommendations from Pilot Inspections of the Inspection Tool



# Recommendations From Pilot Inspections

## **NMRAs and national environment management authorities**

01

should receive specialised training and awareness on antimicrobial waste management (including specialised training in AMR site risk assessments) as part of their stewardship towards the fight against AMR.

02

## **Governments and the United Nations procurement agencies**

should provide incentives geared towards encouragement of pharmaceutical manufacturers to voluntarily comply with the AMR reduction requirements.



# Recommendations From Pilot Inspections

## Central/accredited analytical laboratories

should be supported to build capacity to sample and test antimicrobial residues in the effluent discharge waters, including water bodies nearest to the pharmaceutical factories, to levels as small as those required for the PNEC-ENV or PNEC-MIC of the antimicrobial APIs..

03

AMS  
recommendations

## National environment management authorities

should be supported to amend their respective National Environment Standards for Discharge of Effluent into Water or Land Regulations so as to provide maximum permissible limits that are within the PNEC-ENV or PNEC-MIC for all antimicrobial active ingredient.

04

# Recommendations From Pilot Inspections

## API Manufacturers

05

provide information on waste and waste water treatment methods for each antimicrobial API as part of Material Safety Data Sheets (MSDS).

AMS  
recommendations

06

## WHO and coordinating UN agencies on AMR (FAO, WOA, UNEP)

should consider publishing guidance on test methods that are able to quantify antimicrobial residues in solid, semi-solid and liquid waste at the level of the PNEC values (**in  $\mu\text{g/L}$** ) as these are currently not available to the pharmaceutical industry). Also provide references for the discharge targets, PNEC values for all antimicrobial APIs.



# Recommendations From Pilot Inspections

## Laundry companies and Waste disposal companies



should be required to apply decontamination methods that deactivate the antimicrobial residues in the effluent and waste water generated during the laundering of the protective clothing.

This should be made one of the licensing requirements



# Objective of the Inspection Tool



To provide key areas that regulatory / self-inspection inspectors need to consider in embedding the AMR perspective into their routine inspection practices.

- *Particularly issues relating to:*
  - *waste management and protection of the environment from antimicrobial waste; &*
  - *cross-contamination of antimicrobial products*

# Scope of the Inspection Tool

The tool applies to all areas



where the handling of antimicrobial substances, ingredients (APIs) or products could lead to cross-contamination, or discharge to

the

- Include manufacturing sites for antimicrobial ingredients (APIs) &
- finished pharmaceutical products (FPPs) for human and veterinary use.

# Developed Training Prospectus and Training Materials



Intended  
to raise  
awareness  
of:

- AMR as a global health challenge
- what NMRAs, NEMAs & manufacturers of antimicrobial products can do in spearheading AMR awareness & implementation of appropriate controls for curbing AMR, in the spirit of One Health approach

# Capacity Building for heads of NMRA & NEMAs





World Health Organization

REGIONAL OFFICE FOR Africa

# AMR Unit WHO/AFRO Brazzaville, Congo

