

Address by Sujith J Chandy, ICARS' Executive Director, at the World Health Assembly side event: 'Accelerating Action on Antimicrobial Resistance: Opportunities for further and integrated action on antimicrobial access and stewardship'

The spoken word applies

Just imagine for a moment... You're a patient in a rural area in one of the many countries in this world lacking basic health infrastructure. You walk 6 km with high fever, cough and body aches to reach the only health care facility nearby. The doctor hasn't come yet, but there are already 80 patients waiting. Finally, after three hours, the doctor sees you for two minutes, writes a prescription for cotrimoxazole, which you get free from the pharmacy in the facility. But he says it may not be fully effective and so prescribes another medicine available in the outside pharmacy shop. Three days later you are not improving, and you walk another three km to the nearest pharmacy shop. The medicine costs one month of your wages. You cannot afford it and so you buy only enough for two days.

This my friends is a reality, a question of access, affordability and equity, and highlights the need for universal health coverage (UHC), health systems strengthening, stewardship to ensure access to effective antibiotics. AMR is a global development issue hitting the world's vulnerable populations hardest.

Discovery and development of technical innovations is very important. However, we must ensure that antimicrobials are handled with care – changing behaviours and practices that drive misuse.

The Global Action Plan, NAPs, IACG, and the Quadripartite, have been instrumental in initiating and catalysing change. However, many LMICs face difficulties in moving these plans into action and change on the ground.

At ICARS we support LMICs in translating such policy ambitions into practice by working with the government and local researchers to develop, test and scale-up evidence-based cost-effective solutions that address local needs, across the One Health spectrum.

We are grateful to the government of Denmark for establishing ICARS in 2019. Since then, we have partnerships with 16 LMICs spanning more than 30 projects already.

Many projects focus on promoting appropriate use of antimicrobials. One such example is Georgia, where we partner with the ministry of health and hospitals to implement an AMR-stewardship programme. I am pleased to report very good progress with more than 80% implementation compliance in the hospitals. We expect this evidence to inform national policies for all Georgian hospitals.

In other projects we focus on the uptake of innovation. For example, with the support of GAMRIF, we have just completed a project in partnership with PorkColombia to understand challenges for a subsidised private diagnostic service for prudent antimicrobial use in Colombian pig farming. One important finding is that such as service is more cost-beneficial than current empirical antibiotic use. The findings have already impacted policy in Colombia.

Looking at the environmental aspects of "one air – One Health", in Brazil we are partnering with the university of Sao Paulo to reduce airborne dust-bound pollution and transmission



of AMR in the community and in farms. Likewise, we have stewardship projects in Asia and Africa in multiple sectors.

Working with behavioural change is not easy – in many LMICs it's challenging – but our projects study the challenges, provide context specific solutions to address them, and then build capacity for sustainable impact.

Acting in silos is not enough, as antimicrobial access and stewardship are highly interdependent. No access means no foundation for stewardship – no stewardship, means no sustainable access to effective antimicrobials.

We need the Global North and South to come together, in the spirit of One Health, in partnerships, public, private, across sectors, and professions.

The dire need for integrated action in the access stewardship dimension is clear. We hope that this event will inspire and catalyse further action. Let me leave you with the eternal challenge – "Antimicrobials have saved us; can we save them?"