



Antimicrobial Resistance
National Research Programme



NATIONAL RESEARCH PROGRAMME: ANTIMICROBIAL RESISTANCE

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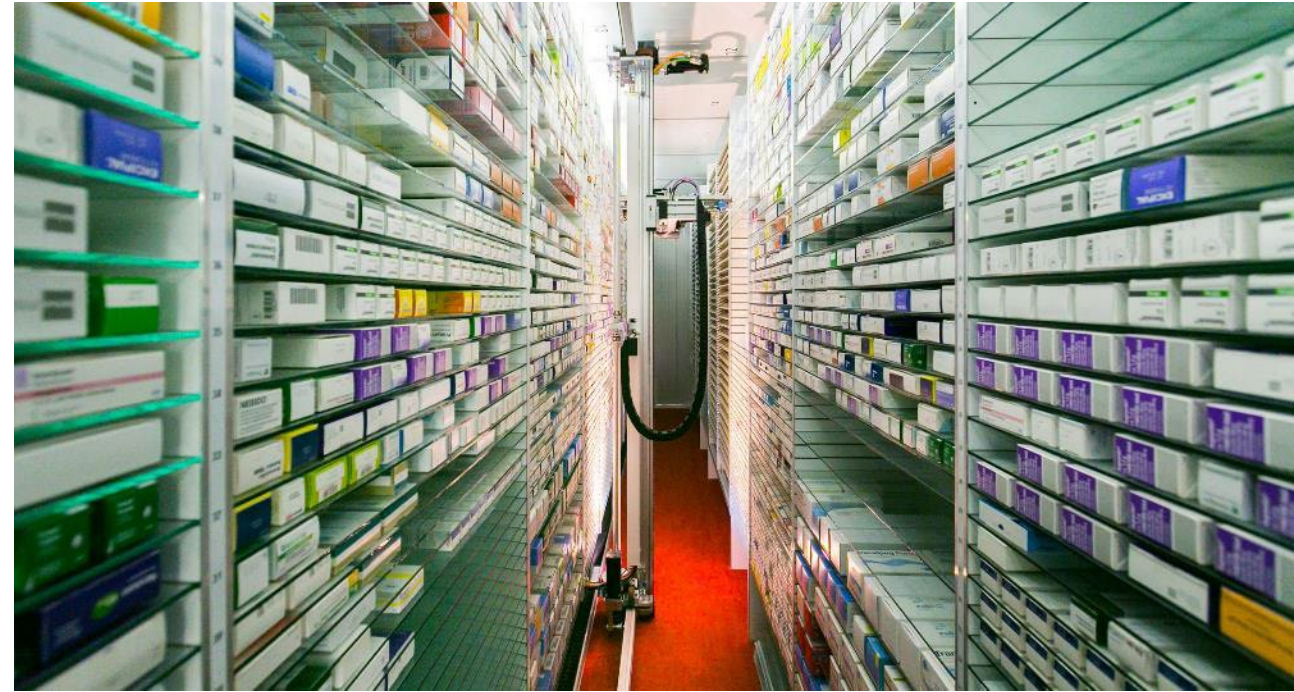
TACKLING AMR WITH A ONE HEALTH APPROACH

ROUTES AND
RESERVOIRS
OF AMR-
DETERMINANTS &
ONE HEALTH
AMR-SURVEILLANCE

FASTER
DIAGNOSTICS
AND NEW
THERAPEUTIC
APPROACHES

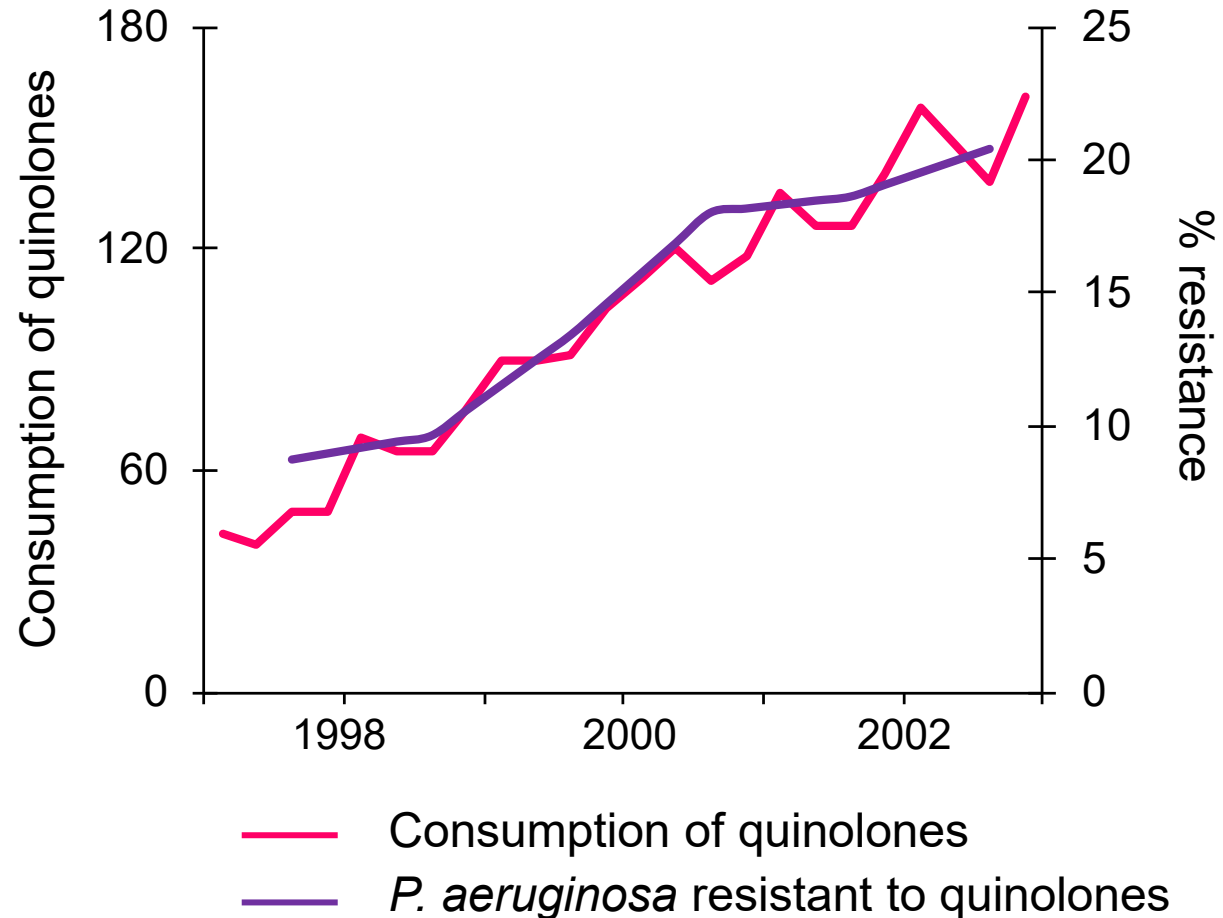
OPTIMIZED
USE OF
ANTIBIOTICS AND
BEHAVIOR
CHANGES

THREE THEMATIC AREAS

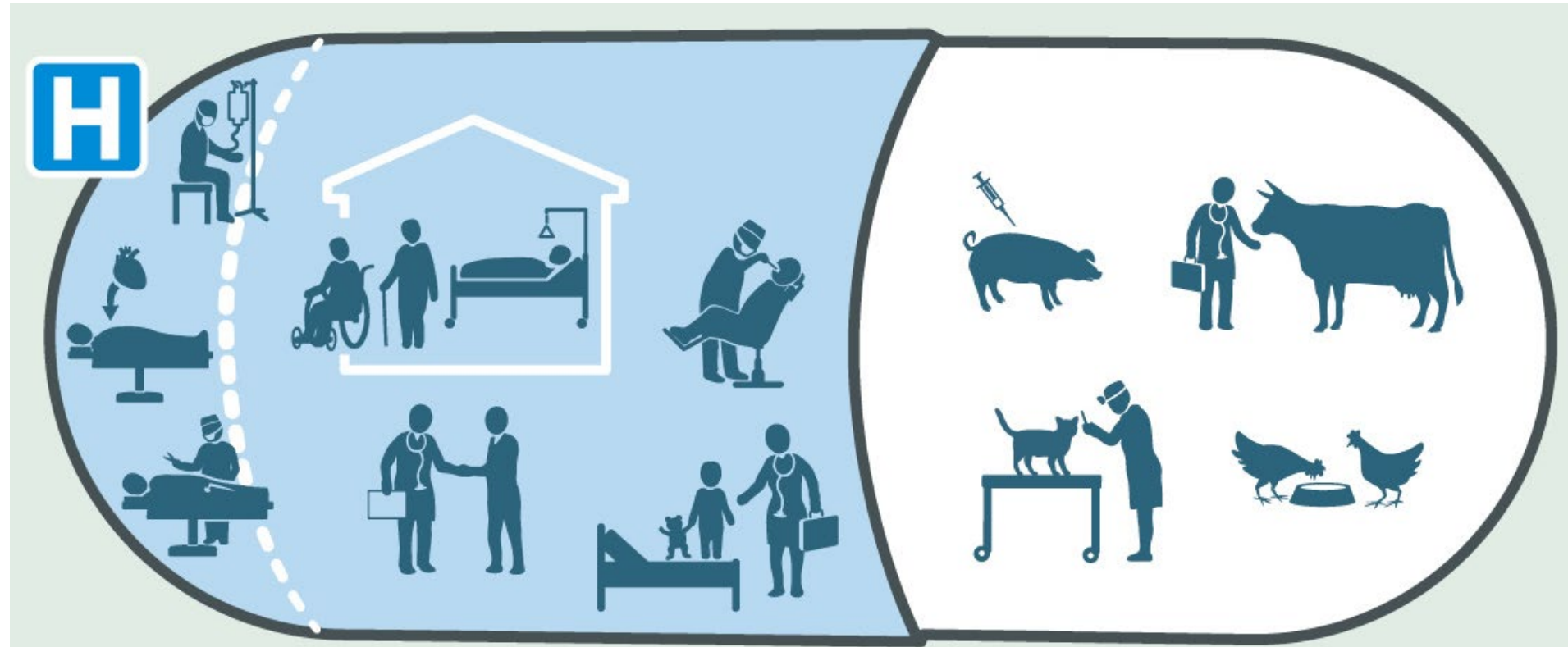


OPTIMIZED USE OF ANTIBIOTICS AND BEHAVIOR CHANGES

Direct link between antibiotic consumption and resistance



Consumption of antibiotics



Consumption of antibiotics in human medicine



85-95%
in outpatient settings

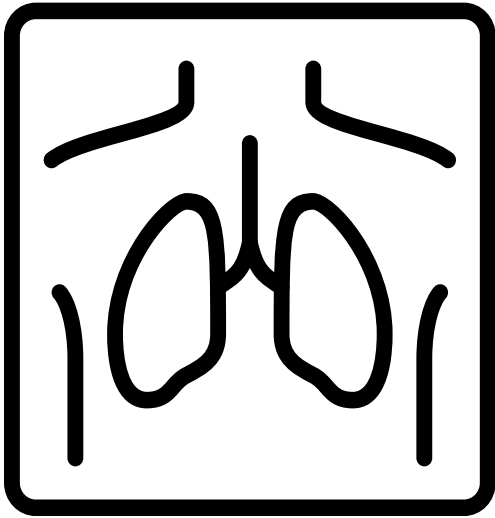
BMJ 2018; 363: k3047; Plos Medicine 2020; 17: e1003139

The most
common
indication



at least 1/3
inappropriate

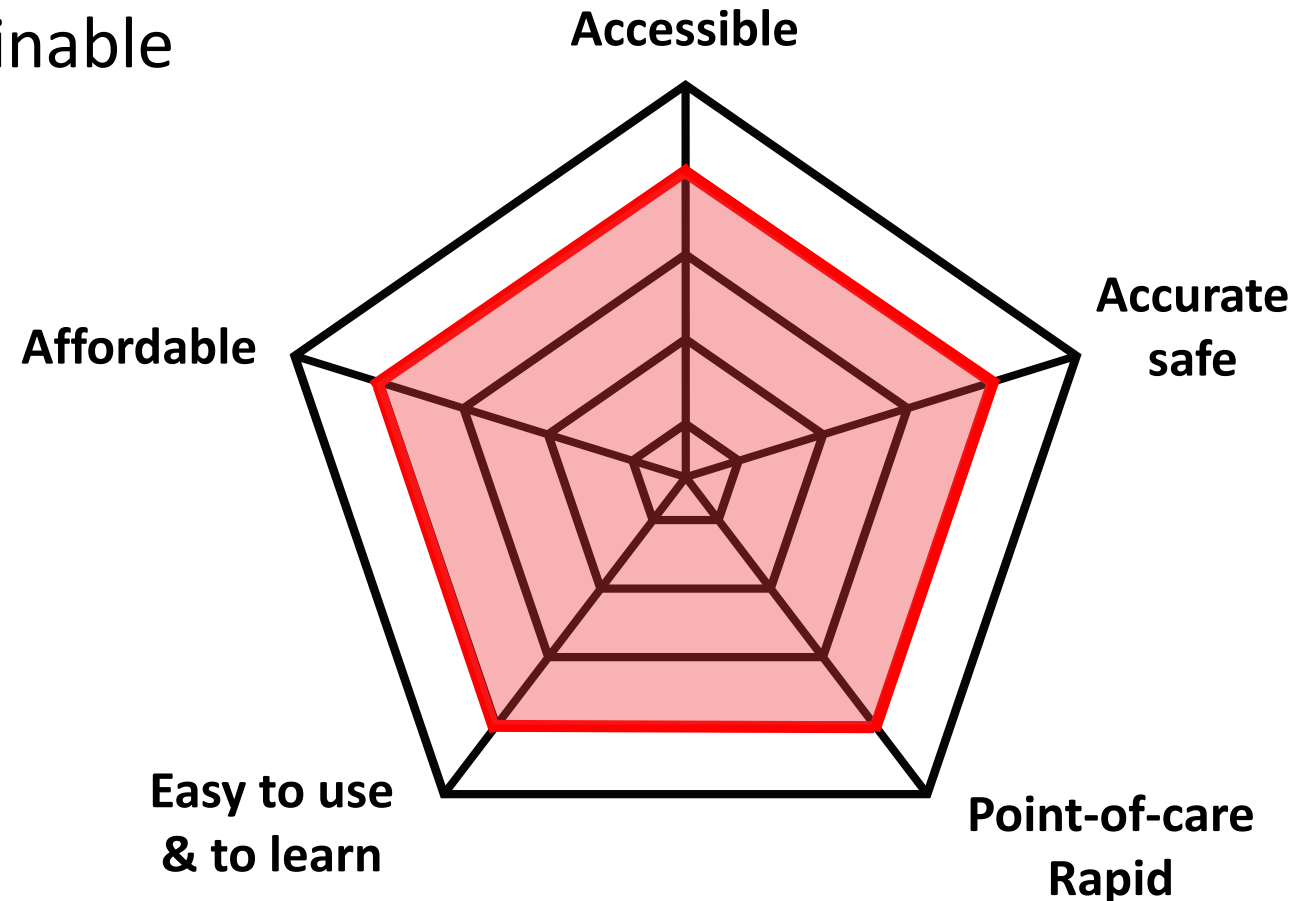
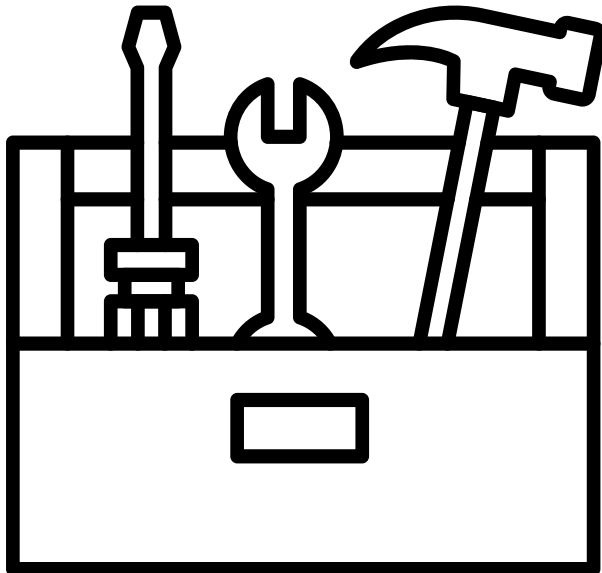
Current diagnostic approach: Radiography



- Low diagnostic performance of chest Xray:
Sensitivity 69% - Specificity 85%
- Virtually absent at primary care level

We need improved diagnostic tools to tackle inappropriate antibiotic use in primary care

- Diagnostic tools scalable and sustainable

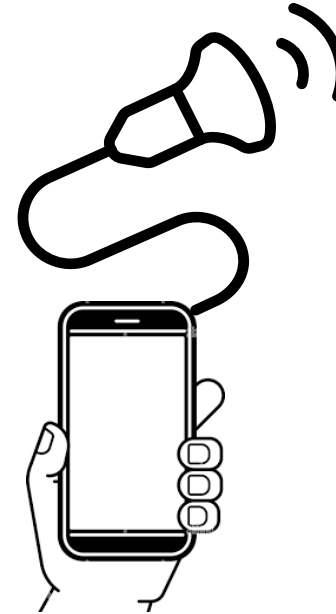


Diagnostic tools in primary care to reduce prescriptions

Biomarker
Procalcitonin



&

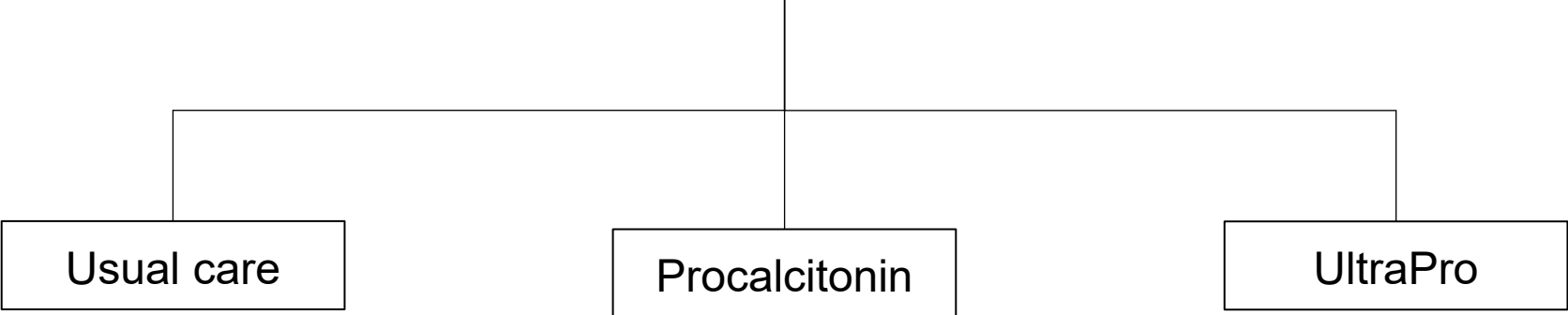
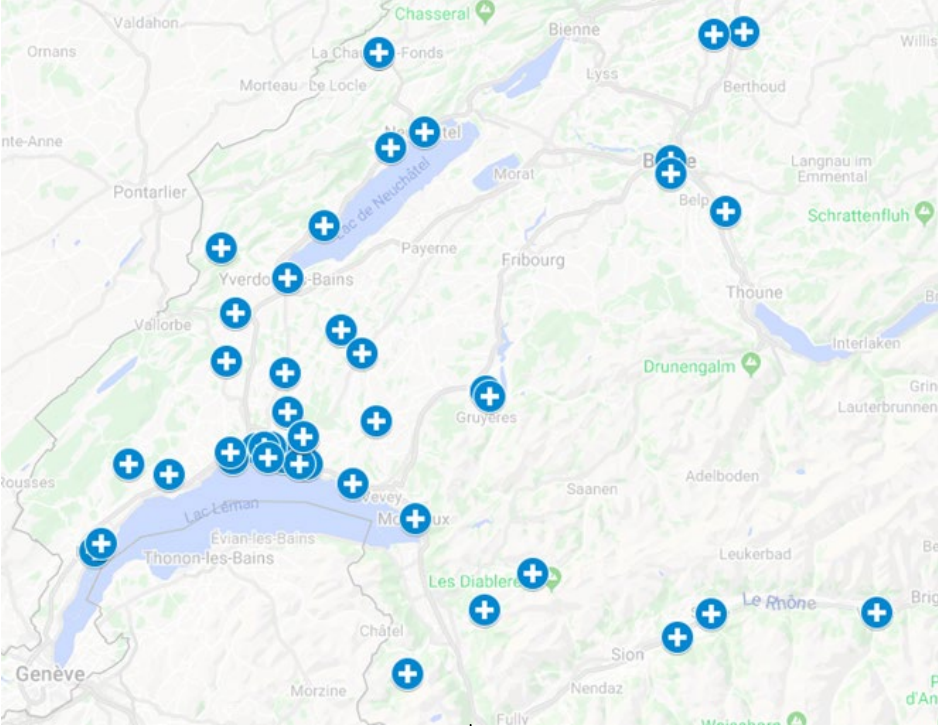


Radiology
Lung ultrasound



UltraPro
A clinical decision algorithm

60 general practitioners in Switzerland



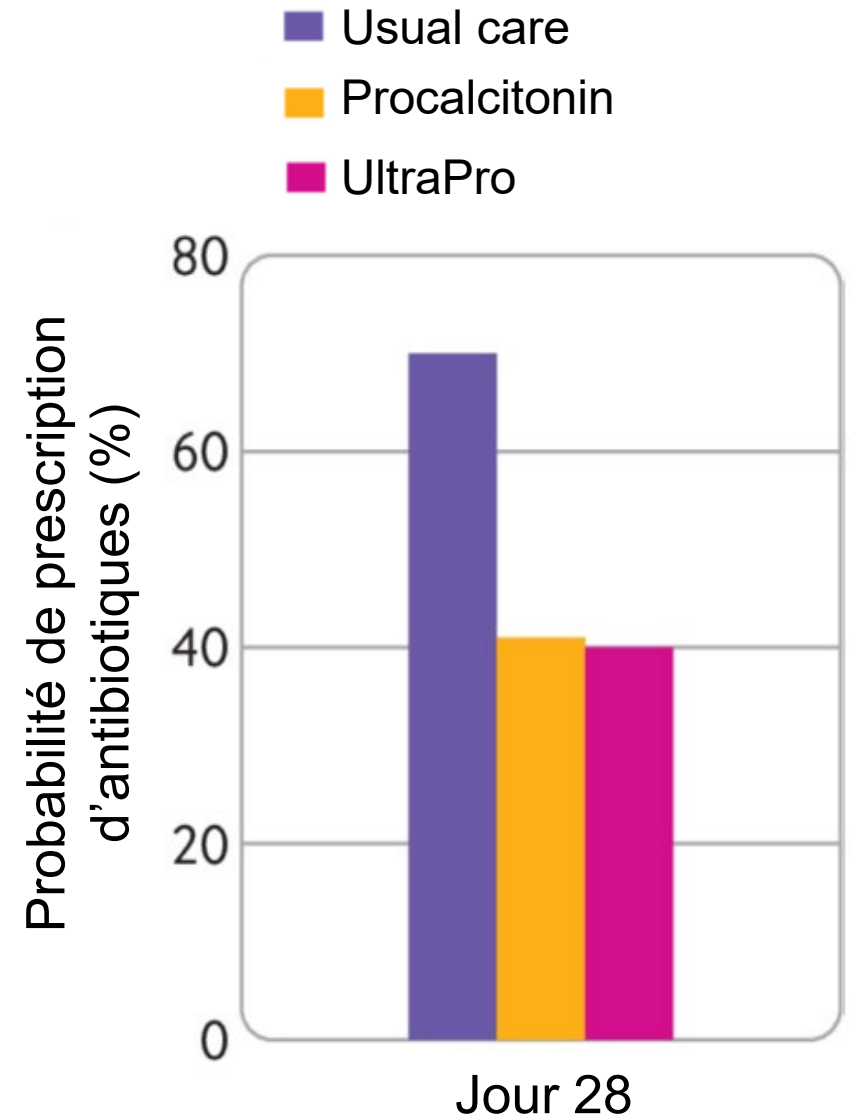
Antibiotic prescriptions

Reduction of one third in prescriptions with procalcitonin

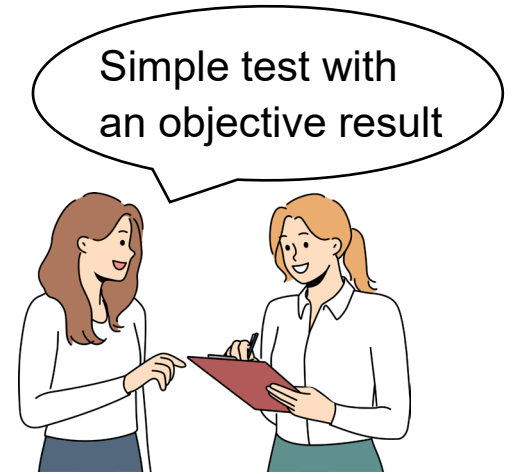
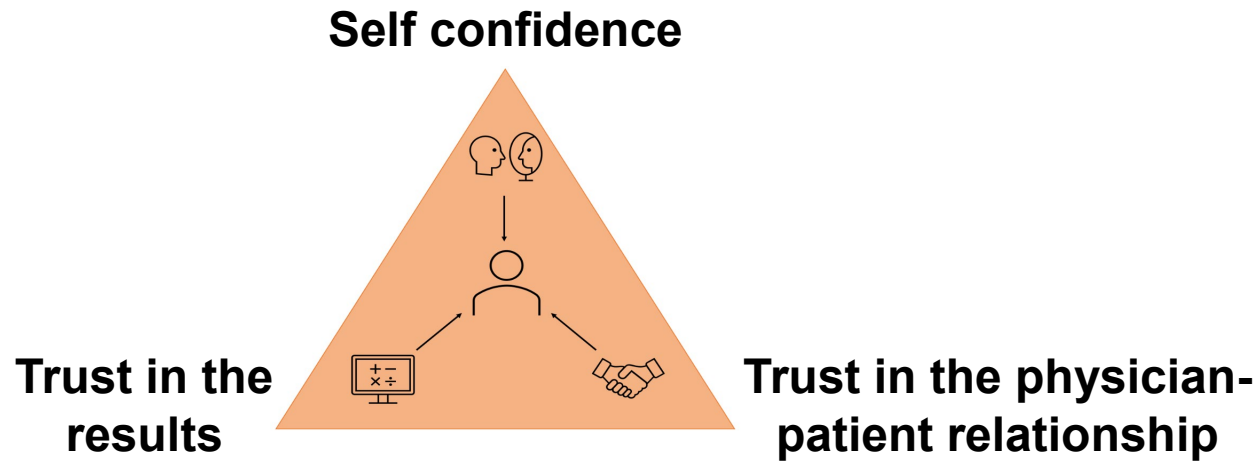
Need to test 4 patients to avoid 1 antibiotic

Same recovery rate in both group

Similar cost between usual care and procalcitonin
2 Euros per percentage reduction in prescriptions




«Procalcitonin» feasible within 20 minutes in the practice

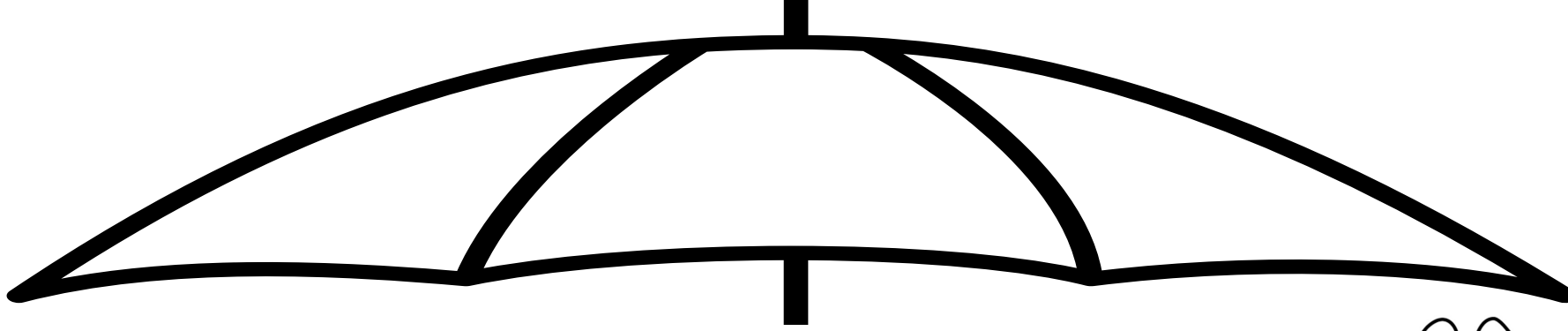


For a successful implementation

- Inclusion of procalcitonin in the local clinical guidelines
- Procalcitonin covered by insurance plans
- Confirm the effectiveness of procalcitonin when implemented on a large scale:
Continuous monitoring of antibiotic prescriptions in primary care

UltraPro

 **SNF** NRP 72 – Antimicrobial Resistance



ImPro study

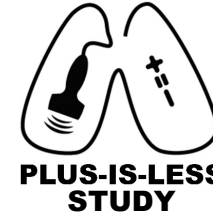
Implementation of point-of-care
Procalcitonin to reduce
antibiotic prescription in Swiss
primary care

 **SNF** Project funding

ASAP

Antimicrobial Stewardship in
Ambulatory care Platform

 Swiss Confederation
Federal Department
of Home Affairs FDHA
Federal Office
of Public Health FOPH



Procalcitonin and Lung
UltraSonography based antibiotics
in Lower rEspiratory tract infections
in **S**wiss Emergency Department

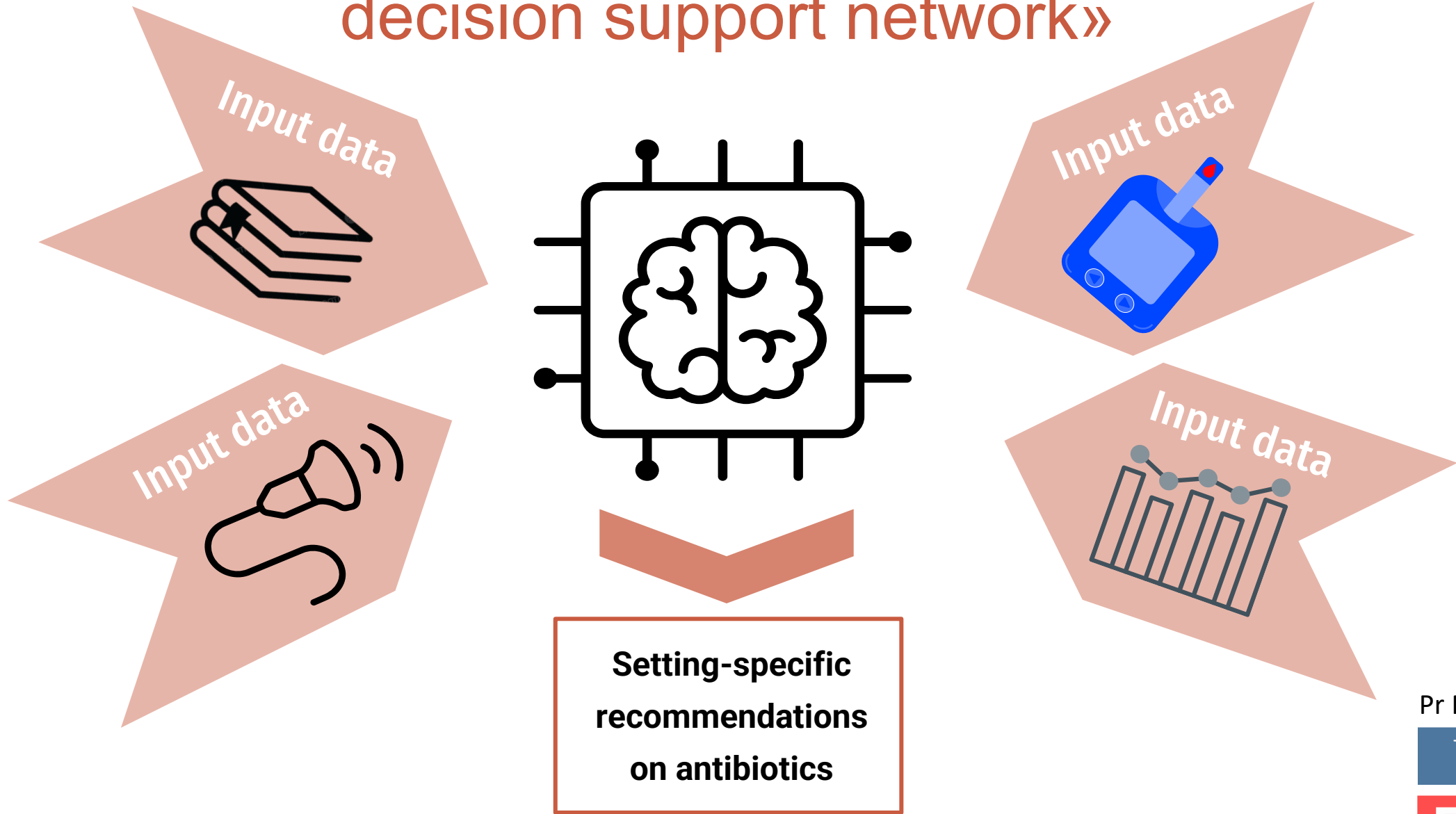
 **SNF**

Investigator Initiated Clinical Trials (IICT)
2021



 **SNF** NRP 72 – Antimicrobial Resistance

Using data to build a «multimodal multi-task digital decision support network»



Pr M-A Hartley



To slow down the development of resistance through research **We have to make an impactful use of research data**

We need support from stakeholders to transition from evidence to implementation

To facilitate the reimbursement of new evidence-based tests

To support continuous monitoring of antibiotic prescription in primary care

We can exploit the One Health principle by transferring experience in one area to the other

New diagnostic tools developed in human medicine can be adapted to veterinary medicine

The experience on monitoring of antimicrobial prescribing in veterinary medicine can be translated to human medicine

We can use innovative AI models to utilize data effectively in the fight against AMR

Multimodal models can offer customized recommendations that align with specific settings and real-time epidemiological trends....and democratize access to validated guidance

Acknowledgements



unisanté

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All family medicine physicians
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^b
UNIVERSITÄT
BERN

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Catherine Pluss



Pr Annie Hartley and team



Pr Kevin Kain and team



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