

ANTIMICROBIAL RESISTANCE (AMR)-A SURVIVOR'S STORY

**A Presentation At The Lessons Learned For Antimicrobial Resistance
From Previous International Science Panels Workshop, 28-29 April
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By

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AMR- I AM A SURVIVOR

- Mashood had a stent placed in his urinary tract because of a kidney stone removal in 2020. He went for the removal of the stent after 31/2 months (November 2020), 48 hours later he had fever. He felt he had malaria and typhoid, and had to take medicines for those conditions. Later, it was rightly diagnosed that his symptoms were due to a drug resistant urinary infection. While battling with this, he contracted Covid-19 infection and he was admitted to the hospital, where he received several courses of expensive antibiotics. His infection persisted even after he survived Covid-19 and was discharged from the hospital, and finally got resolved due to a course of a Reserve antibiotic. The whole experience was terrifying. Mashood retired as the Director Food and Drug Services of Nigeria, and now consults for international organizations. He is also a member of the First WHO Taskforce of AMR Survivors.

WHO Task Force of Antimicrobial Resistance (AMR) Survivors

- The Task Force is constituted of people who have survived drug-resistant infections themselves or cared for those with serious drug-resistant infections. The Task Force has representation from those who were affected by drug resistant bacterial, tuberculosis, HIV and fungal infections,
- Survivors of AMR infections and their caregivers have unique perspectives on the detection, diagnosis, treatment, and care they received (or did not receive). Their ideas and experiences on how patients, health care providers, and communities can better deal with drug-resistant infections are invaluable and can help shape improved patient-centered care. Patient stories can help humanize a complex, technical health and development challenge.
- The inaugural meeting of the WHO Task Force of AMR Survivors was held from 10-11 October 2023.
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The functions of the Task Force are:

- Sharing AMR survivor stories in ways that can reach a global audience, harnessing both formal media and social media channels
- Engaging AMR survivors in WHO events and discussions on AMR
- Raising awareness of AMR and advocating for relevant improvements across clinical, research, development, and policy spheres
- Advocacy for increased funding and donor commitments for the AMR response at all levels
- Developing a framework for patient advocacy and identifying priority areas to guide continuing Task Force activities

WHY PATIENT CENTRE AMR NARRATIVE?



The Dilemma- How Do We Classify AMR?

- A Disease/ An Opportunistic Disease?
 - A Supra Disease?
 - A Distractor?
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- It comes like a thief in the night, distract attention from the primary disease which may not be an infection.

Members of WHO Taskforce of AMR Survivors



Members of WHO Taskforce Chatting With Prince Williams at The World Together Solving the Antibiotic Emergency Meeting In London At the Royal Society House on 16th May 2024.



Telling My Survival Story



Another WHO Taskforce Member- Dr. Felix (A Paediatrician), the father of a son who could not survived AMR Diaorrhea,



Another Taskforce Member Pharm. Nour whose mother survived AMR



SYSTEMIC CHALLENGES:

National

- i. Poor state of public health institutions.**
- ii. Poor state of private health facilities, especially laboratories.**
- iii. Inadequate knowledge and capacity of health workers, especially in private health institutions.**
- iv. Low quality and poor standard of private laboratories and other facilities.**
- v. Poor state of public infrastructure, and**
- vi. High Out of Pocket Expenses on healthcare.**

Global

Poor collaboration (Access, SFMs).

WHAT TO DO TO TACKLE AMR

- Prevent Infections.
- Create and sustain Awareness and Advocacy.
- Establish and Sustain Standards.
- Develop Guidelines, SOPs and Plans.
- Adhere to Guidelines, SOPs, Rules and Regulations.
- Increase and sustain access to quality antimicrobials.
- Enhance Capability and capacity, especially microbiology diagnostic laboratory .
- Treat Infections appropriately.
- Carry Out Surveillance Regularly.
- Take advantage of technology.
- Report and Apply Outcomes of Surveillance.

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- THANK YOU