World Antimicrobial Awareness Week 2020
Message of WHO Regional Director for Africa, Dr Matshidiso Moeti

From 18 to 24 November, the African Region will join the global community in encouraging everyone to handle antimicrobials with care and to be united to preserve antimicrobials.

Antimicrobial resistance occurs when drugs such as antibiotics and antivirals no longer work as they should and, in some cases, no longer work at all because bacteria, parasites, fungi and viruses adapt and no longer respond to these medicines.

In spite of the limited data in the African Region, a recent study shows the emergence of resistance to artemisinin, an antimicrobial used in treating malaria. One in 10 previously treated TB cases is resistant to one or more TB drugs and there is also fluoroquinolone-resistant Escherichia coli (E. coli), making some cases of diarrhoea difficult to treat.

Globally, one in 10 medicines is estimated to be substandard or falsified, and the African Region is affected more than other parts of the world. In markets and on street corners, people are buying antibiotics of unassured quality, without prescriptions. Antimicrobials are the most frequently reported substandard and falsified medicines, and these substandard products are a key driver of antimicrobial resistance. Recent studies suggest that 72% of hospitalized COVID-19 patients received antimicrobials, but only 8% had infections that can be treated with these medicines.

Antimicrobial resistance is made worse by misuse and abuse of antibiotics in humans and farm animals. Improving water, sanitation and hygiene is also fundamentally important in preventing disease, and ensuring that contaminated waste, containing resistant microbes, does not enter human and animal food systems.

Efforts are ramping up to address these issues. So far this year, six African countries have joined the Global Antimicrobial Resistance Surveillance System (GLASS), bringing the regional total to 27 participating countries. Ten African countries have established national antimicrobial consumption surveillance systems and three countries have
updated their essential medicines lists to include the AwaRe categorization\(^1\) which helps to classify antibiotics towards ensuring optimal use. At WHO, we are currently working with three countries to strengthen “One Health” integrated surveillance across the human health, food chain and environment sectors and we are working with five countries to establish national stewardship policies and programmes to optimize the use of antimicrobials.

In partnership with the Food and Agricultural Organization of the United Nations, the World Organisation for Animal Health, Africa CDC, the African Union Inter-African Bureau for Animal Resources, and the UN Environment Programme, we are organizing the African Region’s second joint campaign and first virtual campaign, for World Antimicrobial Awareness Week. This campaign will include press and social media events, panel discussions and presentations from civil society organizations and professional institutions from the human health, animal health and environment sectors.

So, during this World Antimicrobial Awareness Week, I urge everyone to join efforts to combat antimicrobial resistance:

Governments, partners and the private sector can work together to secure safe, effective antibiotics for generations to come, including by investing in water, sanitation and hygiene infrastructure and limiting the use of antibiotics in livestock and aquafarming.

Health workers should prescribe and dispense antibiotics only when they are truly needed, and they can limit the spread of infections through good hygiene and sanitation practices.

Finally, as individuals, we can ensure we only use antibiotics when prescribed by a licenced health professional, making sure to take the full prescribed course. We can also play a part in preventing infections and reducing the need for antibiotics by frequently washing our hands and covering our mouths when coughing or sneezing.

\(^{1}\) AWARe Categorization is a classification system that places antibiotics into three main groups (ACCESS Group, WATCH Group, RESERVE Group) based on the preferred antibiotic options for each syndrome. In so doing it balances the benefits, harms and the potential for resistance.
Misuse and abuse of antimicrobials puts us all at risk, so let us do our best to protect these life-saving medicines.

**Learn more:**

- Clinical management of COVID-19 interim guidance 27 May 2020 (provides guidance for clinicians caring for COVID-19 patients including AMS recommendations such as when it is/when it is not warranted to give COVID-19 patients antibiotic treatment).


- Water, sanitation, hygiene, and waste management for SARS-CoV-2, the virus that causes COVID-19, WHO interim guidance, 29 July 2020

- Follow-up to the political declaration of the high-level meeting of the General Assembly on antimicrobial resistance: Report of the Secretary-General, United Nations General Assembly, 2019

- No Time to Wait: Securing the future from drug-resistant infections Report to the Secretary-General of the United Nations, 2019

- Chen T, Wu D, Chen H et al., Clinical characteristics of 113 deceased patients with coronavirus disease 2019: retrospective study. BMJ 2020; 368: m1091

- Rawson TM, Moore LSP, Zhu N et al. Bacterial and fungal co-infection in individuals with coronavirus: A rapid review to support COVID-19 antimicrobial prescribing. CID May 2020