GUYANA: PROGRESS IN THE IMPLEMENTATION OF THE NATIONAL ACTION PLAN ON ANTIMICROBIAL RESISTANCE (AMR)

COMPLETED: The National Action Plan on AMR. The Plan was written in line with the Regional & Global Action Plans on AMR.

Effective implementation of the National Action Plan on AMR:

- Ensure Political and Leadership Commitment are critical to drive the AMR agenda, mobilize resources, and achieve action.

- Allocate Resources. It takes time, money, technical assistance and dedicated human resources to coordinate across sectors and secure mutual trust, ownership and collaboration.

- Build an Operational Framework
  - Set clear goals
  - Practical management
  - Ensure accountability

Align the strategic goals on AMR with existing special disease strategies/programs

DISSEMINATE AND PUBLISH THE NATIONAL ACTION PLAN
AMR National Action Plan

addresses the full One Health spectrum

AMR should be systematically and formally incorporated in pre-service training curricula for all relevant human health cadres

Also in service training, and other continuing professional education (CPE) by relevant groups for human health nationwide, in public and private sectors

ENFORCE LAWS AND REGULATIONS to ensure that antibiotics are sold and acquired only by prescription.

There is a need to:

- Establish a multi-sectoral working group to ensure implementation of the NAP.
- Monitoring and evaluation of the implementation process
- Allocate funds and resources
- Ensure continuous deliberation and build consensus on common objectives

This committee must integrate:

- Academic sector
- Scientific societies
- Private sector
- Government
- Media
- Consumers

Education & Awareness

Change the behavior with respect to antibiotic resistance in the target groups of human health, consider the following:

- Develop or utilize existing material/guidance to educate about AMR.
- Monitor the change of consciousness and attitudes of the population.
Currently, Guyana is participating in pathogen/disease specific global and regional AMR surveillance initiatives, in Human, e.g.

1. Malaria Surveillance: (treatment efficacy studies)
2. The Global Project (Anti-TB Drug Resistance)

There is an urgent need for strengthening the National Infection Prevention and Control Program needs good funding, clear IPC strategies, implementation plans, and monitoring mechanism.

Also, it is important for the country to participate in more regional and global AMR Surveillance networks/platforms.
Surveillance of Antimicrobial Use/Consumption

**Identify indicators for surveillance** as a first stage

Collect and report sales and consumption of antimicrobials nationwide. Repeat it every one or two years.

**Control antimicrobial sales** nationwide and the consumption of antibiotics in health services

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**Antimicrobial Stewardship & Optimization of Use**

The country must have a **clear national policy for antimicrobial governance and regulation** developed for both, community and hospital healthcare settings.

- Establish strategies and practices to assure appropriate antimicrobial use.
- Generate guidelines for appropriate antimicrobial use in human both at the community and hospital healthcare settings processes on Antibiotic prescription.
- Create a funded National Antimicrobial Stewardship Strategy to support healthcare facility Antimicrobial Stewardship Programs (ASP)/ interventions and strategies.
- Antibiotic Prescription: generate an effective enforcement and control processes.
- Ensure compliance with legislation: establish effective mechanisms for enforcement and control processes.

The country has future plans to establish ASP at national level.

In July of 2018, a Point Prevalence Survey (PPS) was conducted at the Georgetown Public Health Corporation (GPHC), in collaboration with the Pan-American Health Organization.

- **182** Diagnosis
- **269** antibiotics prescriptions
- **336** patient records surveyed

Empiric or targeted treatment

- Empiric treatment: 4%
- Targeted treatment: 87%
- Unknown: 8%

Sample taken for microbiology diagnostic

- Prophylaxis: 36%
- Therapy: 57%
- Unknown: 7%

Prophylaxis or treatment?

- Prophylaxis: 14%
- Therapy: 68%
- Unknown: 21%

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Expand Antimicrobial Stewardship Programs & Interventions

1. **Acute** CARE HOSPITALS (WHO recommendation: at least 70%)

2. **Community** HEALTHCARE FACILITIES