

Summary report on the
**Regional meeting on
data for action: using
antibiotic use data to
improve stewardship and
appropriate use**

Doha, Qatar
13–15 May 2024

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**World Health
Organization**

Eastern Mediterranean Region

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1. Introduction

The WHO Regional Office for the Eastern Mediterranean, in collaboration with the Ministry of Public Health of Qatar, and supported by WHO headquarters, held a meeting on data for action: using antibiotic use data to improve stewardship and appropriate use, from 13 to 15 May 2024 in Doha, Qatar. The meeting followed a regional meeting to review antimicrobial resistance (AMR) country programmes in the WHO Eastern Mediterranean Region, held on 4–6 June 2023 in Cairo, Egypt, where the need for targeted antimicrobial consumption data analysis and utilization had been identified.

The Doha meeting brought together more than 40 representatives from ministries of health and national regulatory authorities of 11 countries¹ of the Region, as well as experts from the Africa Centres for Disease Control and Prevention, Gulf Center for Disease Prevention and Control, National Centre for Antimicrobial Stewardship, Australia (a WHO Collaborating Centre), ReAct Africa, University of Melbourne, University of Washington and World Organisation for Animal Health. WHO staff led the preparation and facilitation of the meeting.

The objectives of the meeting were to:

- share regional and global experiences on use of antibiotic data for improving stewardship and appropriate use;
- develop antibiotic data use profiles of participating countries;
- develop a consensus approach to mapping different antibiotic use data sources at national and facility levels, with the limitations, advantages and potential uses of each data source; and
- outline a data use plan, including analysing data from each source, triangulation and optimal frequency of analysis of each type of data.

¹ Bahrain, Egypt, the Islamic Republic of Iran, Jordan, Kuwait, Oman, Pakistan, Qatar, Saudi Arabia, Tunisia and United Arab Emirates.

The expected outcomes of the meeting were to:

- help countries identify the various available data sources and the feasibility of using the data;
- develop a plan with a timeline for countries to use the prioritized data sources to better understand national consumption patterns, improve the availability of antibiotics through market shaping, understand antibiotic use to drive stewardship activities at facility level and monitor progress based on stewardship and regulatory interventions; and
- develop a roadmap towards consistent and comparable processes for data collection and analysis between countries.

Prior to the meeting, WHO conducted a rapid assessment of available data sources and antibiotic flow in selected countries through a survey and in-depth interviews with WHO country office staff and/or government officials. A template was created to support countries to prepare a plan during the meeting for the utilization of potential data sources on antimicrobial use.

Dr Eman Khairy, consultant, Ministry of Public Health of Qatar, welcomed participants on behalf of the Government of Qatar.

Dr Rana Hajjeh, Director of Programme Management, WHO Regional Office for the Eastern Mediterranean, in her opening remarks stressed the importance of building the capacity of national drug regulators and country officials to better utilize available antibiotic consumption data to inform decision-making and guide stewardship interventions. Additionally, she emphasized the need to better understand the limitations of national and facility-level data sources and the importance of taking timely action towards more appropriate use of antibiotics in the Region.

2. Summary of discussions

The three days of the meeting were organized under three respective themes. Day one focused on sources of antimicrobial use data, day two put the spotlight on the reporting of antimicrobial use data, and day three discussed the use of antimicrobial use data for action.

On the first two days, participants worked in groups to discuss and analyse four case studies. The case studies explored different antimicrobial use data sources at national and facility level. They also discussed the Access, Watch, Reserve (AWaRe) classification and monitoring, the cost of antibiotics procurement, and how to best gather, describe, interpret and utilize available antimicrobial use data. On the third day, an expert panel discussed the challenges encountered while collecting and analysing antimicrobial use data in their respective countries.

Over the course of the meeting, participants from the same country worked together to draft a preliminary antimicrobial data use plan for ensuring future, high-quality data in their countries. Eight countries presented their draft antimicrobial data use plans to the plenary.

3. Recommendations

To Member States

1. Develop a joint plan with all relevant national stakeholders for antibiotic use data collection, analysis and action-taking at all levels.
2. Establish a governing body for standardizing the national data collection system to be able to submit good quality and standardized data on antimicrobial use annually to the WHO Global Antimicrobial Resistance and Use Surveillance System (GLASS) . All stakeholders should be fully aware of the limitations and contexts of data sources when analyzing the data.
3. Promote national awareness of the AWaRe classification of antibiotics and the global target to achieve at least 60% of total antibiotic consumption being Access group antibiotics.

4. Encourage experience- and knowledge-sharing on stewardship implementation using antimicrobial use data among the relevant national stakeholders.
5. Build the capacity of stakeholders in data management, analysis and interpretation at facility and national levels.


To WHO

6. Follow-up with countries closely on the development and implementation of their antimicrobial data use plans at facility and national levels.
7. Support countries to prepare an antimicrobial use annual report.
8. Support countries in the implementation of regulatory interventions and data-driven stewardship activities at facility and national levels.
9. Support knowledge exchange between countries on GLASS data submission and data collection and analysis.

4. Conclusion

The timely availability of good quality data on antimicrobial use at national and facility levels is crucial for improving the use of antimicrobials and informing stewardship activities. The extent and accessibility of such data vary from country to country. It is therefore important to understand the data collection process and recognize its limitations within each country. Building capacity in data management at national and facility levels and encouraging networking and information-sharing between key stakeholders in countries is essential for improving the quality of antimicrobial use data and taking data-informed decisions at a policy level.

In her closing remarks, Dr Rana Hajjeh emphasized the need to develop, present and ultimately implement a detailed antimicrobial data use plan, engaging all key national stakeholders and ensuring high-level political buy-in.



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