

Strategie future per un problema attuale

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Divisione di Malattie Infettive



Ospedale di Cremona

Sistema Socio Sanitario
Regione Lombardia
ASST Cremona

Conflitti di interesse

Finanziamenti per progetti:

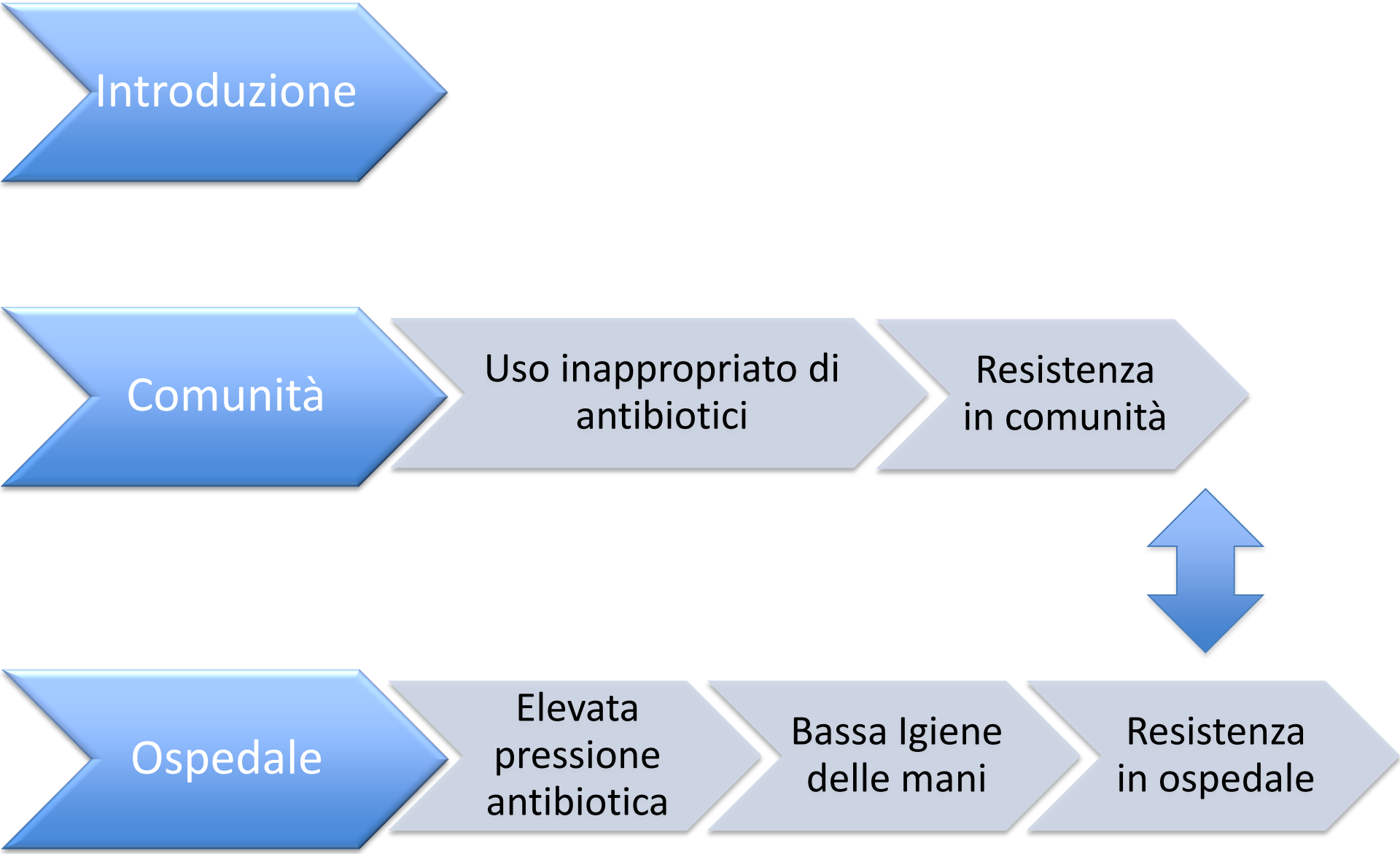
- CCM
- SIMIT

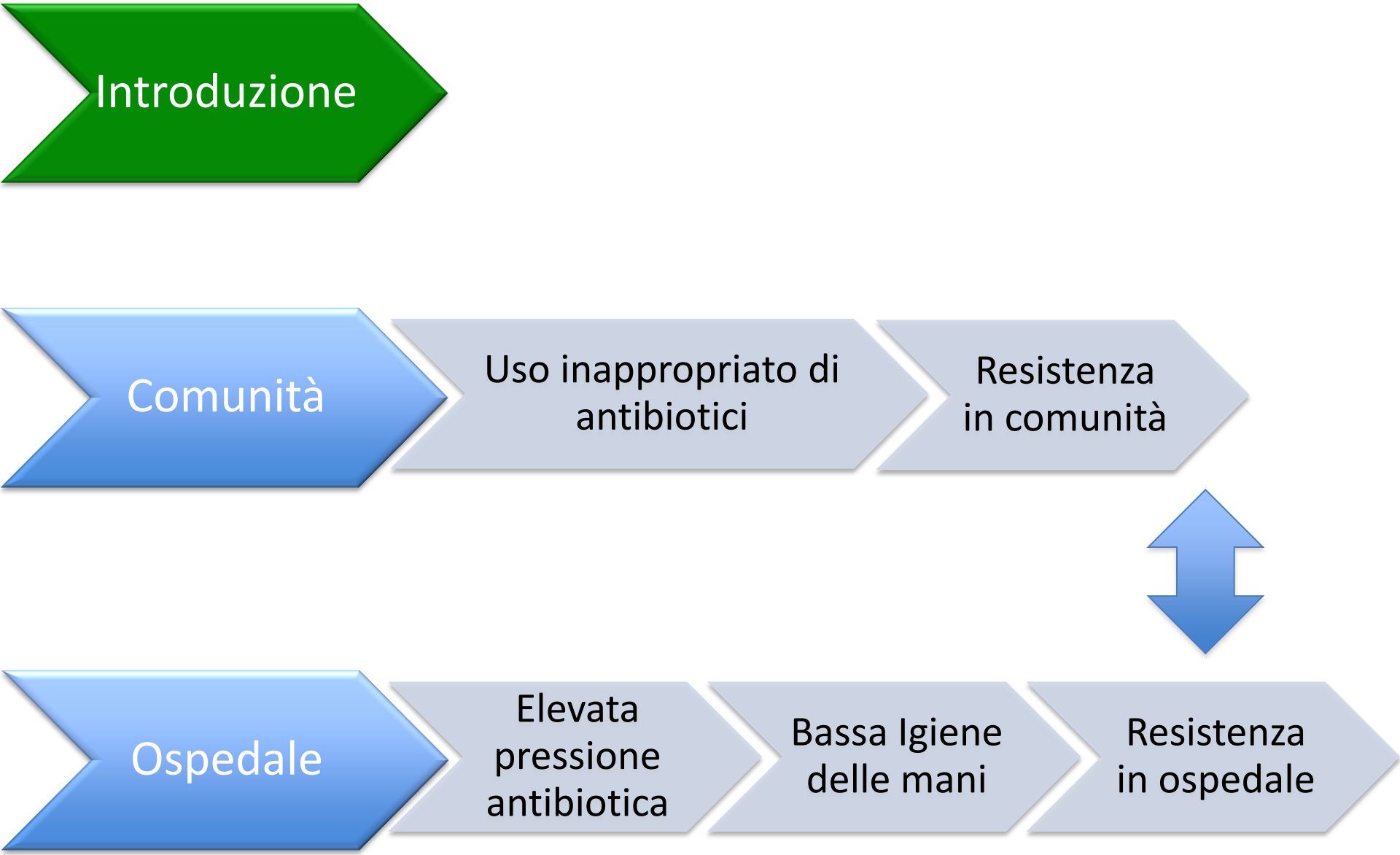
Relazioni a congressi:

- Pfizer

Partecipazione a congressi:

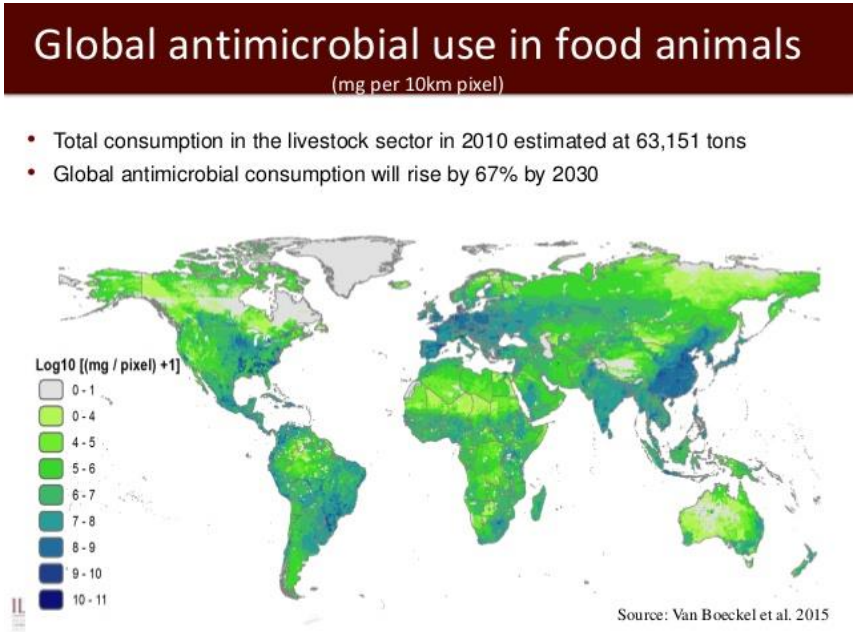
- Jannsen
- ViiV


Introduzione
Comunità
Uso inappropriato di antibiotici
Resistenza in comunità
Ospedale
Elevata pressione antibiotica
Bassa Igiene delle mani
Resistenza in ospedale

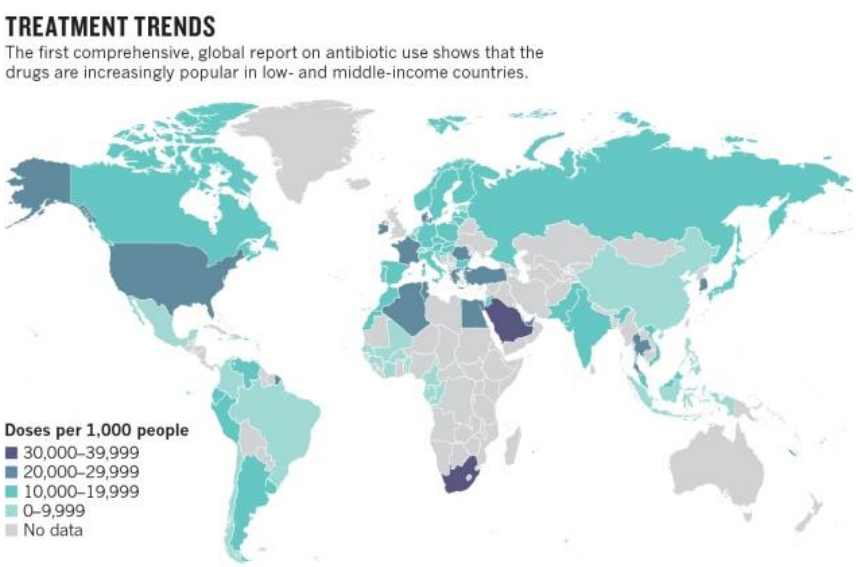

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Antibiotic consumption

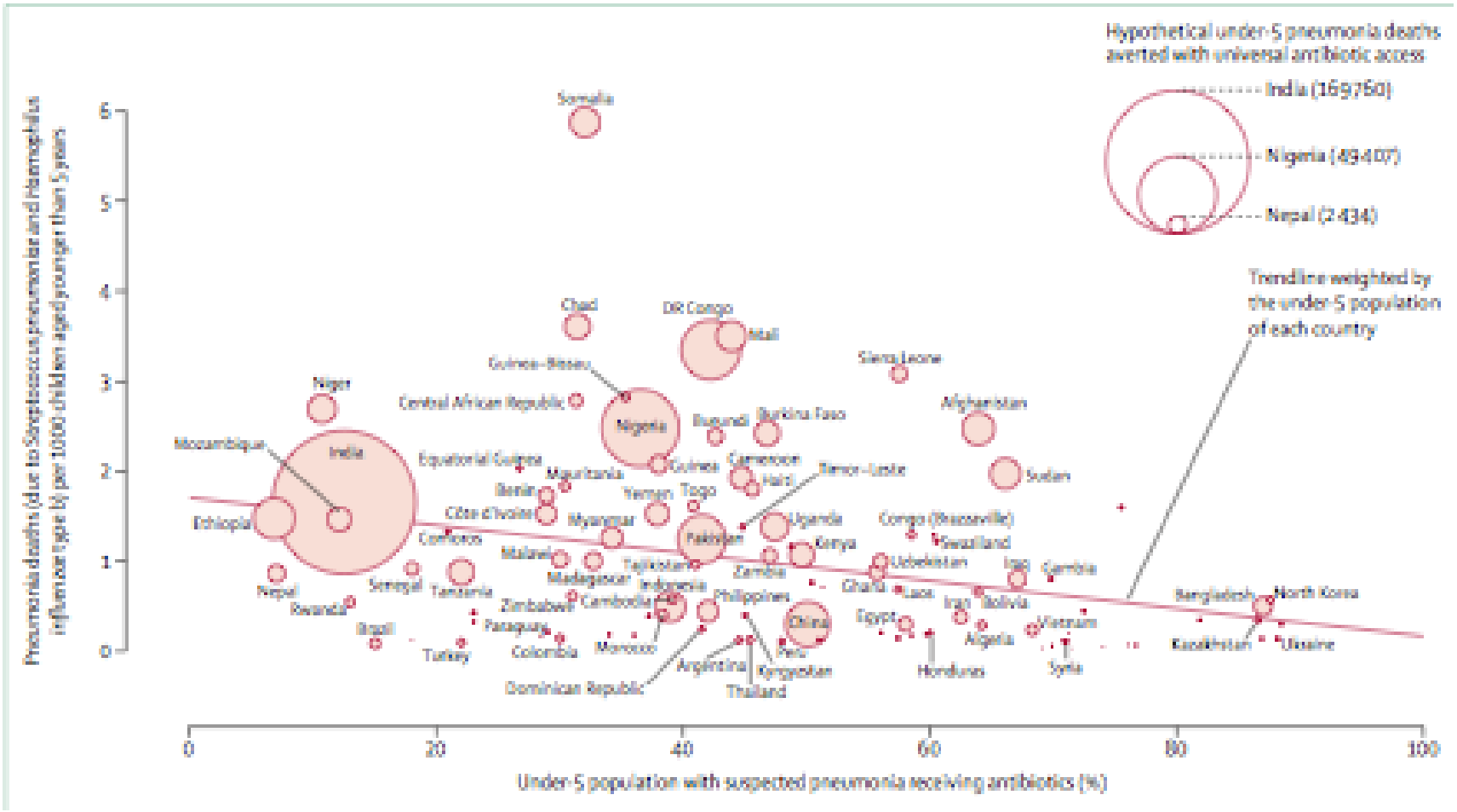
Veterinary use



Human use



Accesso all'antibiotico per polmonite (età <5 anni)



Laxminarayan R,,Lancet, 2016

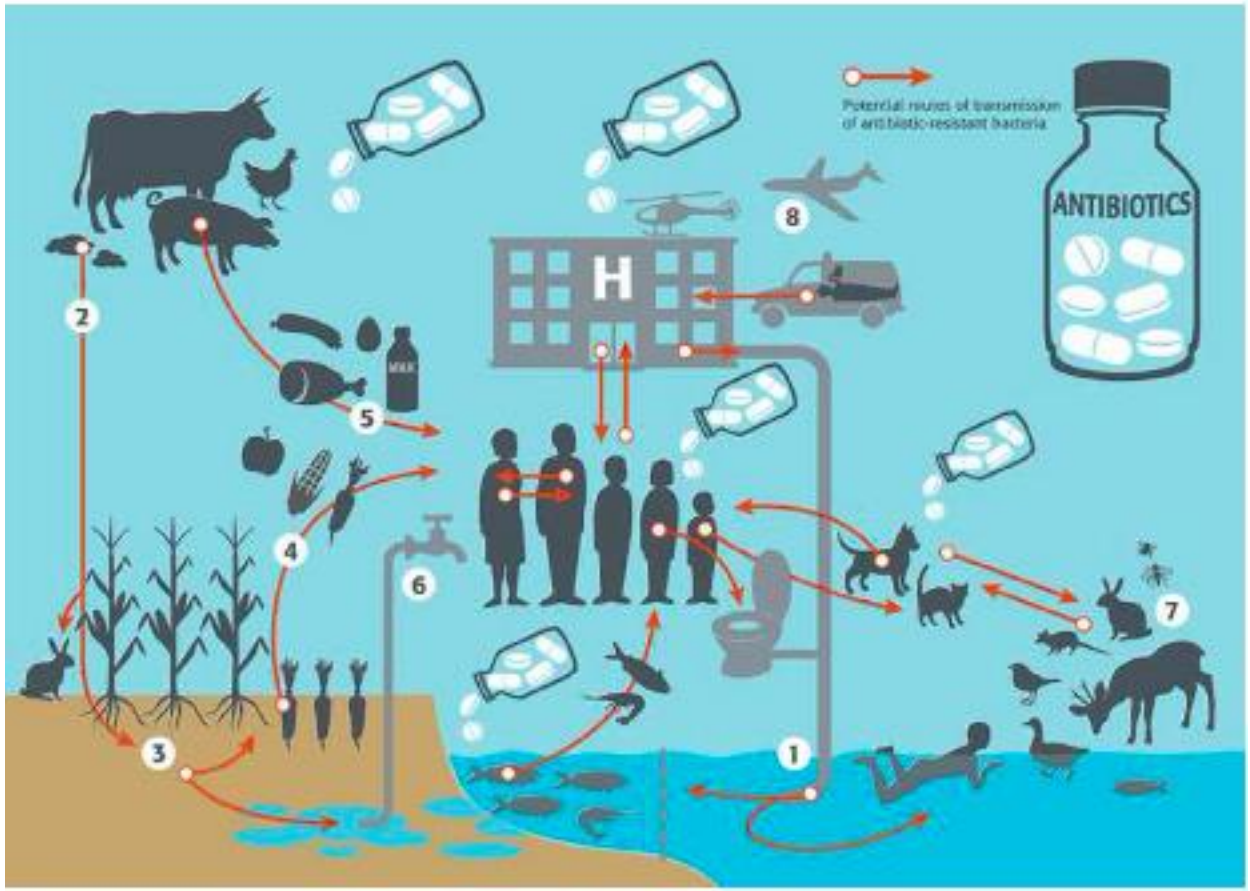
Harbarth et al. Antimicrobial Resistance and Infection Control (2015) 4:49
DOI 10.1186/s13756-015-0091-2

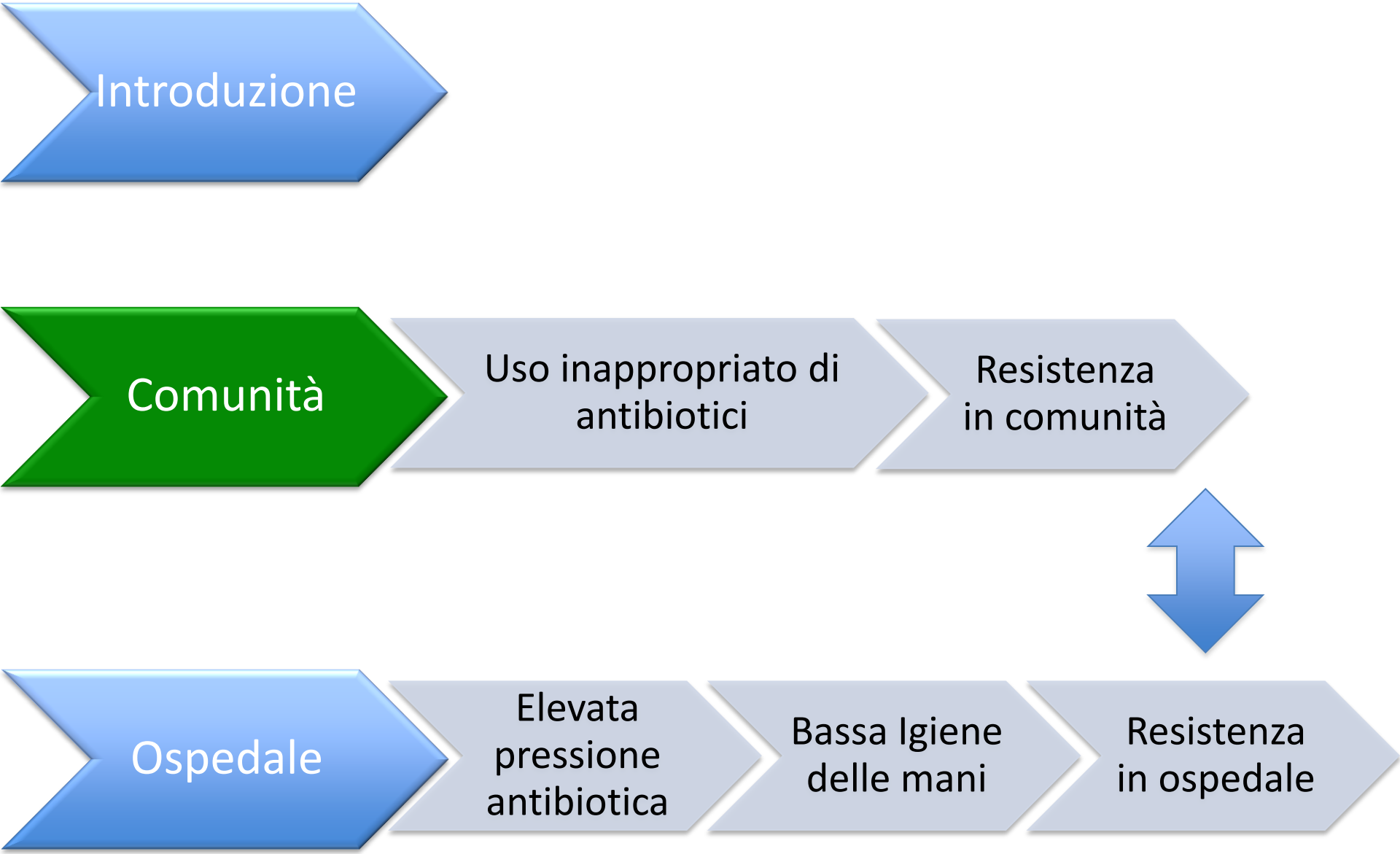
ANTIMICROBIAL RESISTANCE & INFECTION CONTROL

MEETING REPORT Open Access

Antimicrobial resistance: one world, one fight!

Stephan Harbarth[1], Hanan H. Balkhy[2], Herman Goossens[3], Vincent Jarlier[4], Jan Kluytmans[5], Ramanan Laxminarayan[6], Mirko Saam[7], Alex Van Belkum[8], Didier Pittet[1*] and for the World Healthcare-Associated Infections Resistance Forum participants




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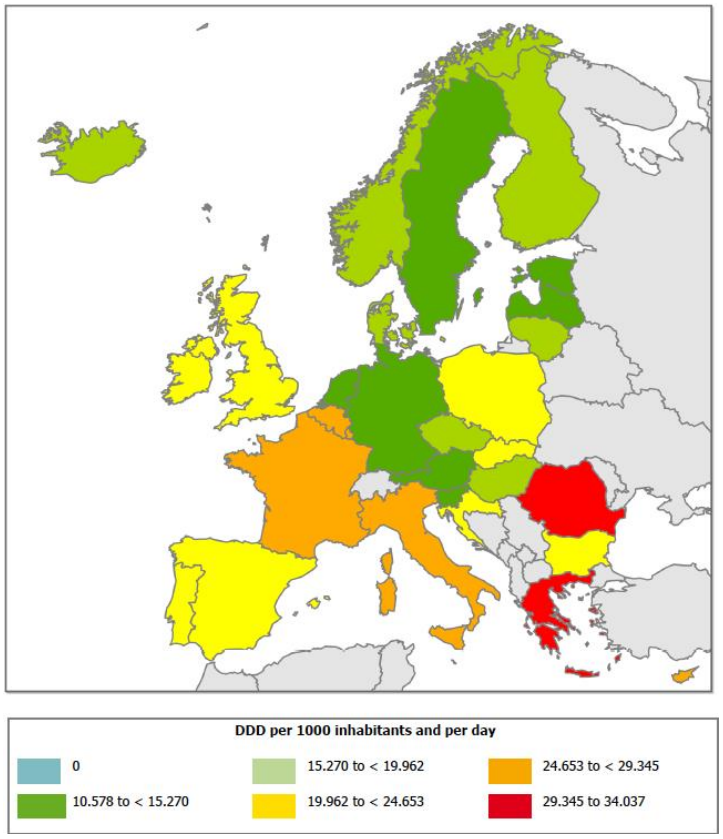
Aree di maggior uso di antibiotiotici

Consumo quotidiano di antibiotici in Italia: 1.762.000 DDD

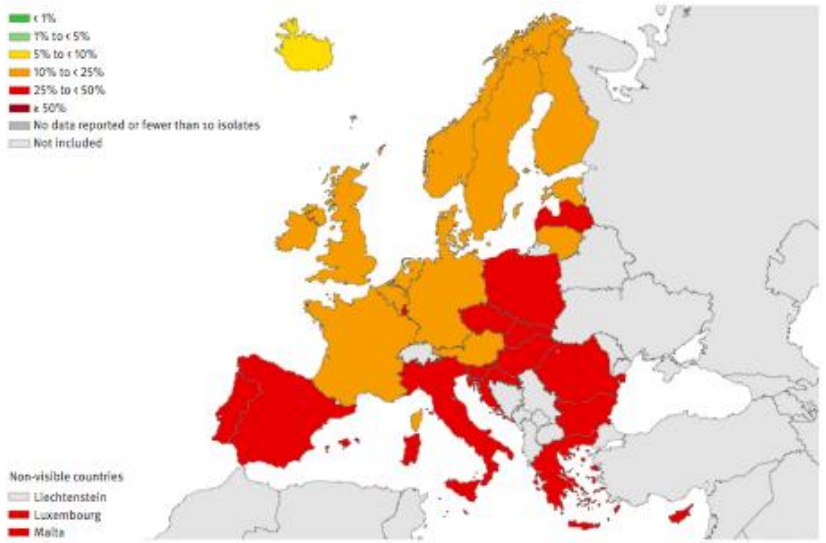
Indicazione	%
Trattamento delle infezioni di comunità	**89,9**
Trattamento delle infezioni correlate all'assistenza	2,4
Profilassi medica	3,4
Profilassi chirurgica	2,7
Trattamento delle infezioni nelle lungodegenze	0,7

Comunità

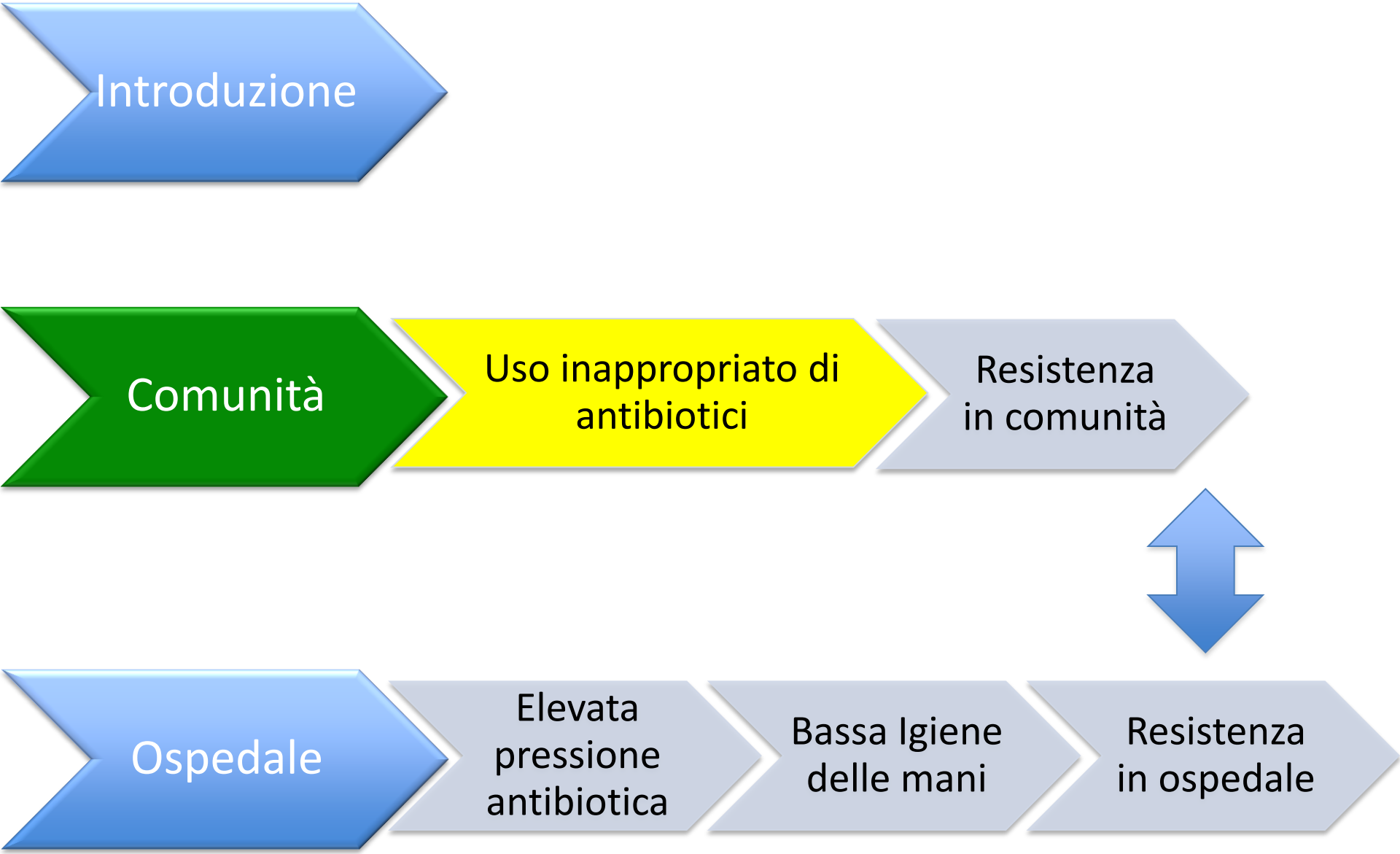
Consumo di antibiotici



Escherichia coli resistente ai fluorochinoloni



ECDC 2016


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Utilizzo inappropriato di farmaci antibiotici in pazienti con malattie infettive in comunità in Italia

(Confronto dati OSMED 2009-2015)

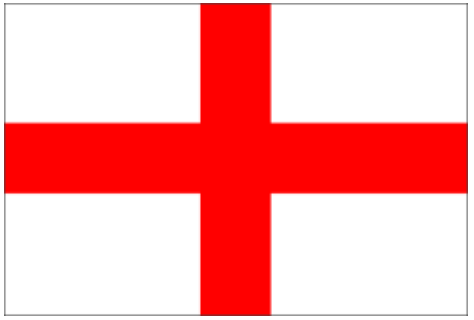
Patologia	Uso inappropriato di antibiotici	Prevalenza di utilizzo inappropriato 2009 (%)	Prevalenza di utilizzo inappropriato 2015 (%)	Differenza 2009-2015
Influenza, raffreddore e laringotracheite acuta	Uso di antibiotici (qualsiasi categoria)	36,2	37,1	+ 0,9
Faringite e tonsillite acuta	Uso di macrolidi, fluorochinoloni e cefalosporine	22,0	31,4	+ 9,4
Bronchite acuta	Uso di cefalosporine iniettive e fluorochinoloni	32,1	34,3	+2,2
Cistite acuta non complicata	Uso di fluorochinoloni	41,1*	41,0	-0,1

* Dati OSMED 2011, non disponibili dati precedenti

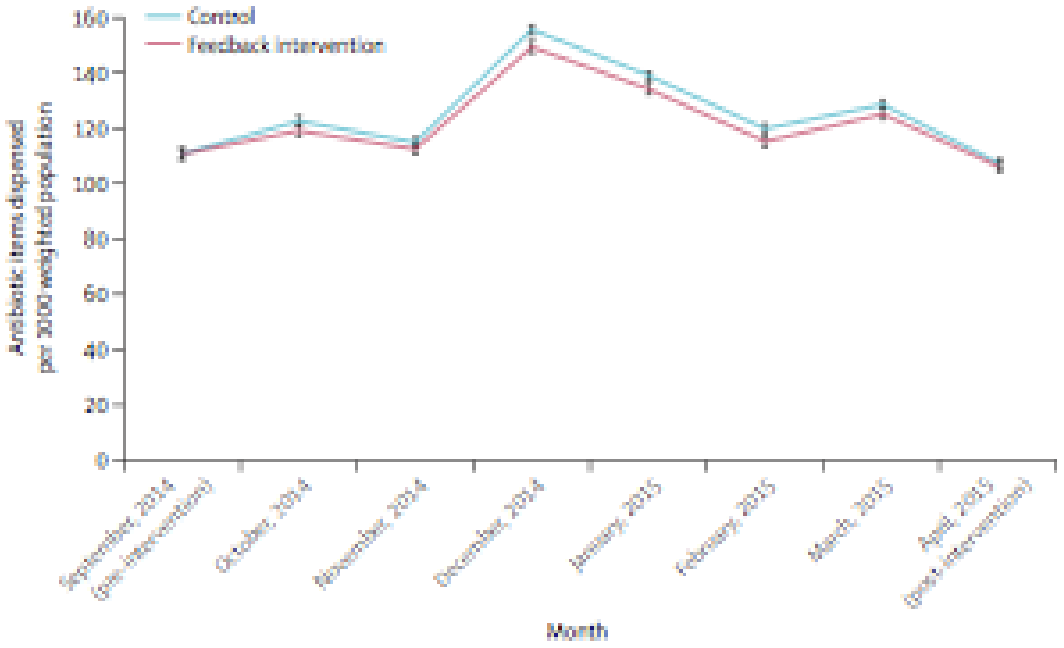
Esperienze di successo e ripetibili

Provision of social norm feedback to high prescribers of antibiotics in general practice: a pragmatic national randomised controlled trial

Michael Hallsworth, Tim Chadborn, Anna Sallis, Michael Sanders, Daniel Berry, Felix Greaves, Lara Clements, Sally C Davies



- Maggiori prescrittori (top 20%)
- Intervento 1: lettera dal Chief Medical Officer
- Intervento 2: materiale per i pazenti

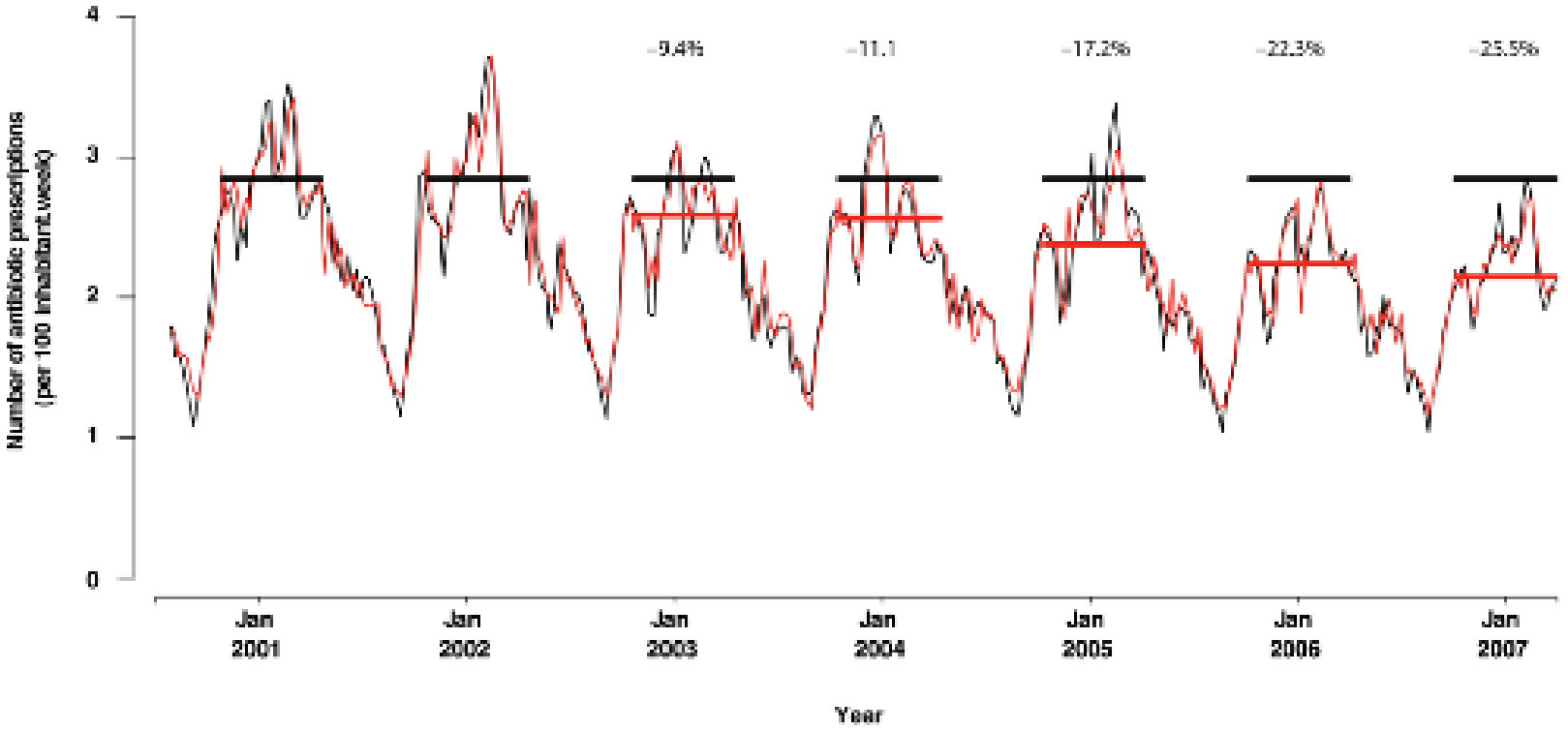


Hallsworth , Lancet MJ 2016

OPEN ACCESS Freely available online PLoS MEDICINE

Significant Reduction of Antibiotic Use in the Community after a Nationwide Campaign in France, 2002–2007

Elifsu Sabuncu[1,2], Julie David[1,2], Claire Bernède-Bauduin[1,2], Sophie Pépin[3], Michel Leroy[4], Pierre-Yves Boëlle[5,6], Laurence Watier[7,8], Didier Guillemot[1,2,9,10]*



2009;6-6

BMJ

BMJ 2013;347:f5391 doi: 10.1136/bmj.f5391 (Published 12 September 2013) Page 1 of 10

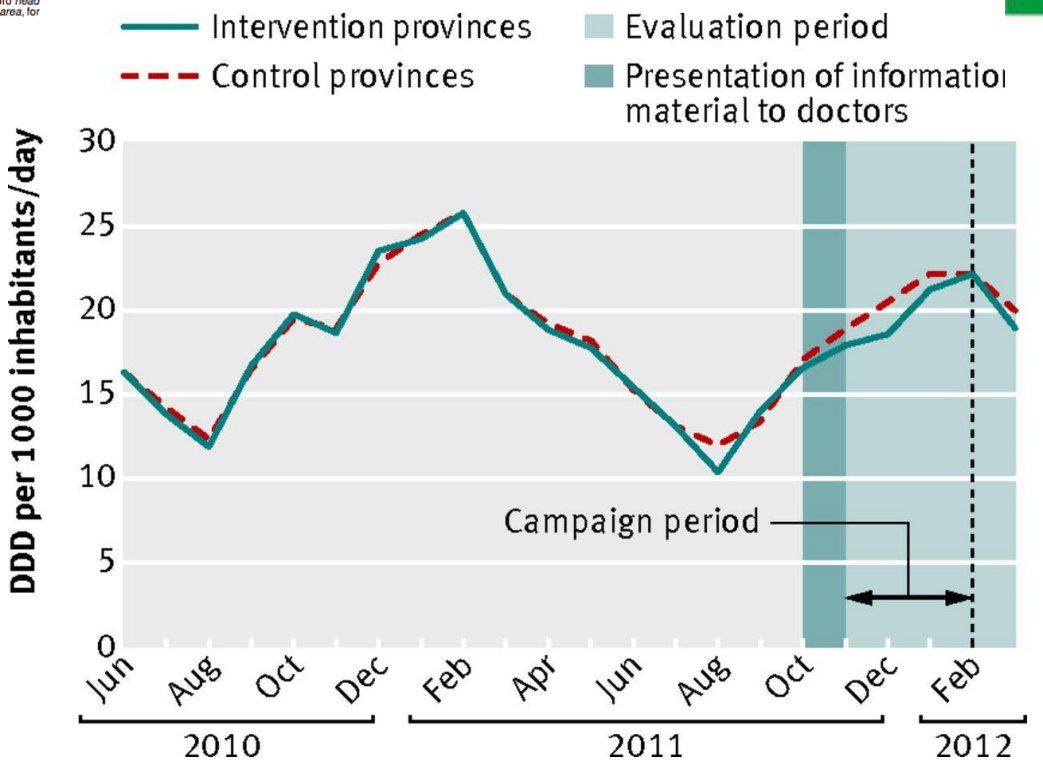
RESEARCH

Feasibility and effectiveness of a low cost campaign on antibiotic prescribing in Italy: community level, controlled, non-randomised trial

OPEN ACCESS

Giulio Formoso *epidemiologist*, Barbara Paltrinieri *scientific journalist*, Anna Maria Marata *clinical pharmacologist*, Carlo Gagliotti *epidemiologist*, Angelo Pan *infectivologist*, Maria Luisa Moro *head of infective risk area*, Oreste Capelli *pneumologist*, Nicola Magrini *head of drug evaluation area*, for the LOCAAL Study Group

Emilia-Romagna Regional Agency for Health and Social Care, Viale Aldo Moro 21, 40127 Bologna, Italy



	DDD	Costi
Intervento:	**-11,9%**	**-25,1%**
Controllo:	**-7,4%**	**-21,8%**
Italia:	**-3,2%**	**-16,1%**

Formoso, BMJ 2013

ACTA PÆDIATRICA
NURTURING THE CHILD

Acta Paediatrica ISSN 0803-5253

SHORT COMMUNICATION

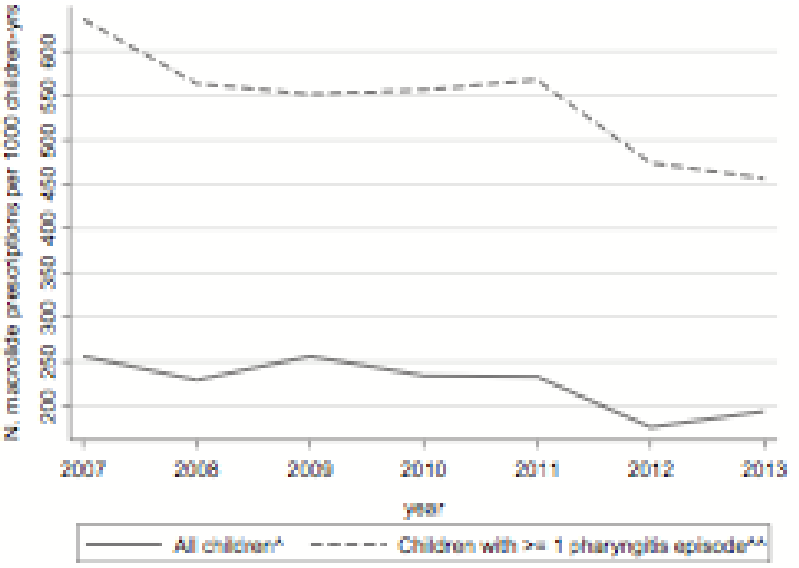
A regionwide intervention to promote appropriate antibiotic use in children reversed trends in erythromycin resistance to *Streptococcus pyogenes*

Carlo Gagliotti (cgagliotti@regione.emilia-romagna.it)[1], Rossella Buttazzi[1], Simona Di Mario[2], Filomena Morsillo[1], Maria Luisa Moro[1]

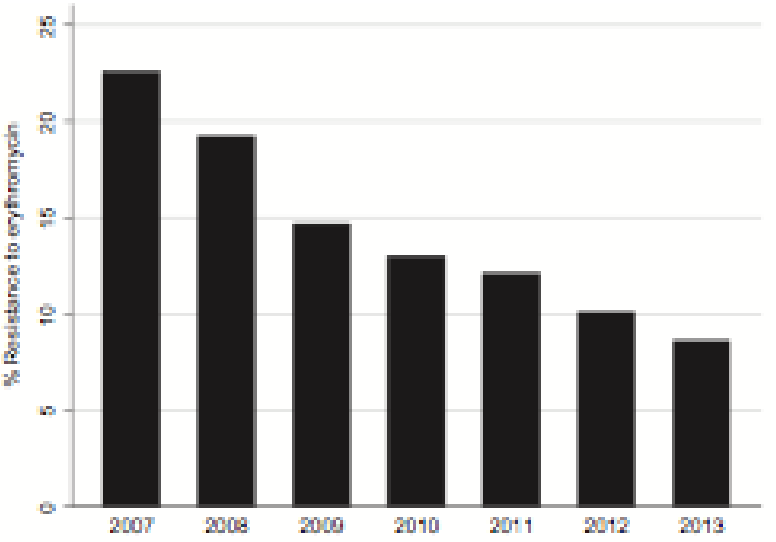
1.Agenzia Sanitaria e Sociale Regionale Emilia-Romagna, Bologna, Italy
2.Direzione generale sanità e politiche sociali – Regione Emilia-Romagna, Bologna, Italy



Consumo di antibiotici



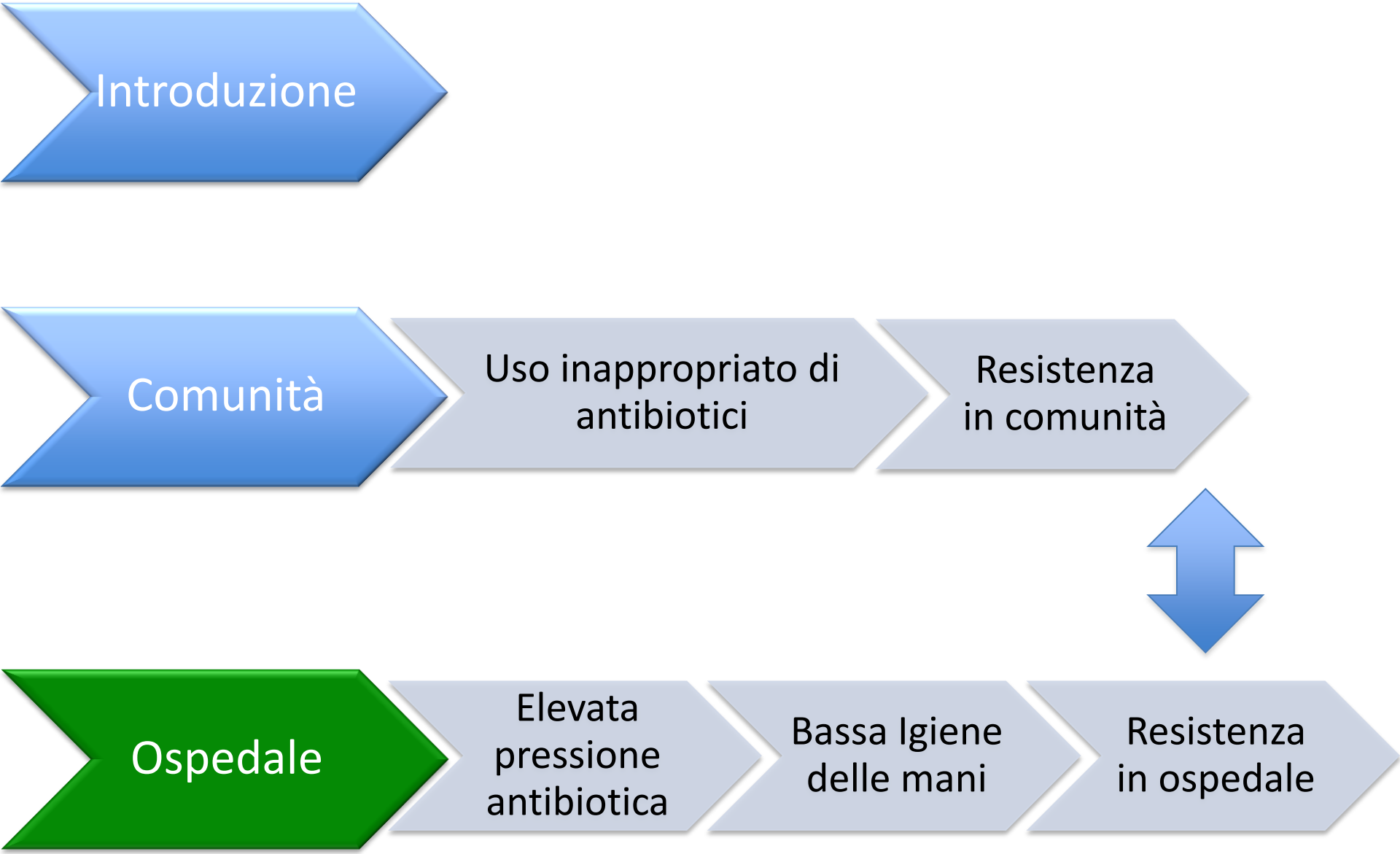
Resistenza ai macrolidi



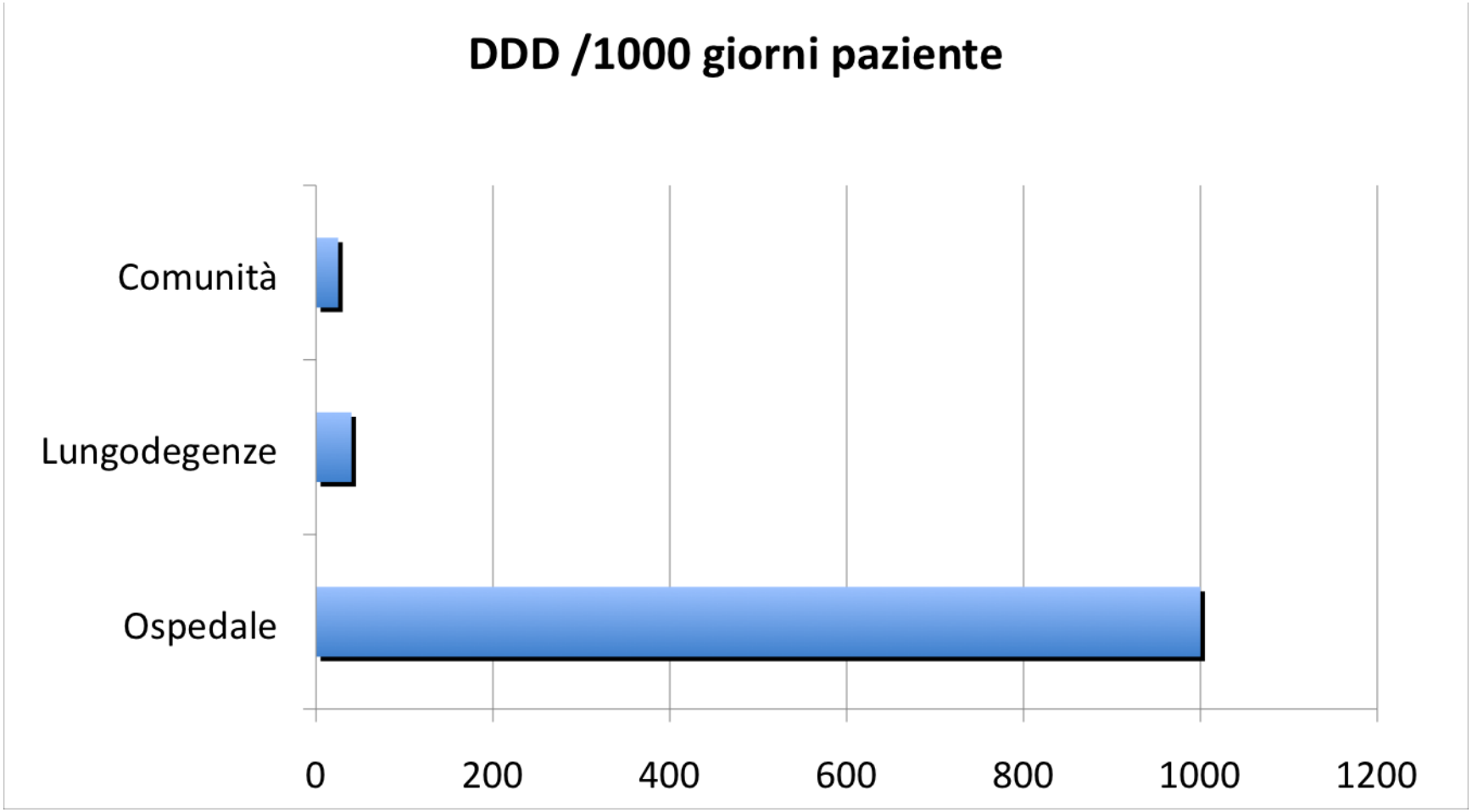
Possibili interventi

- Interventi sull'appropriatezza della terapia antibiotica in comunità

- E' necessario un approccio multispecialistico


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Elevata pressione antibiotica



Resistenza antimicrobica

Farmaci



Mani

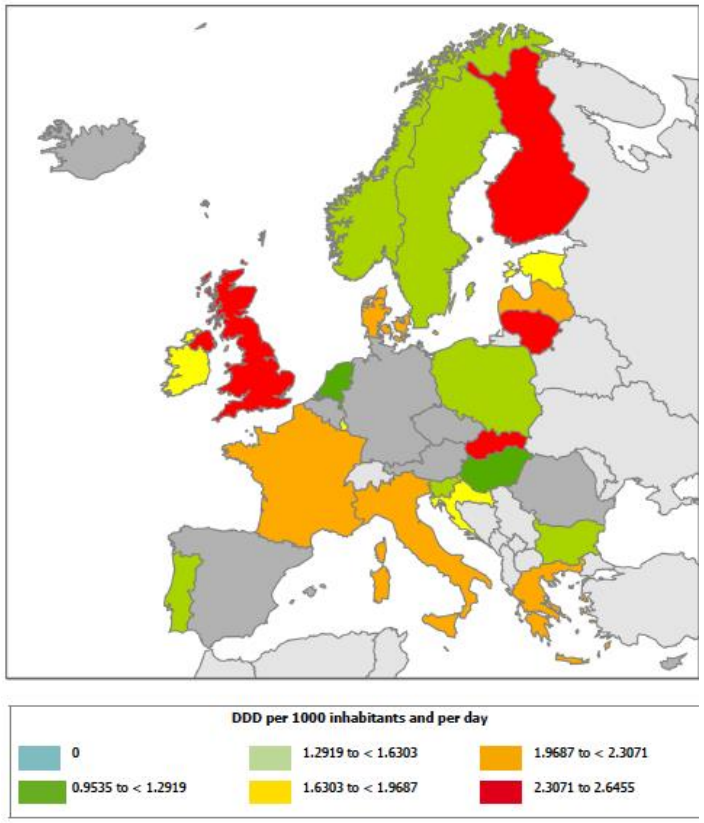


Selezione

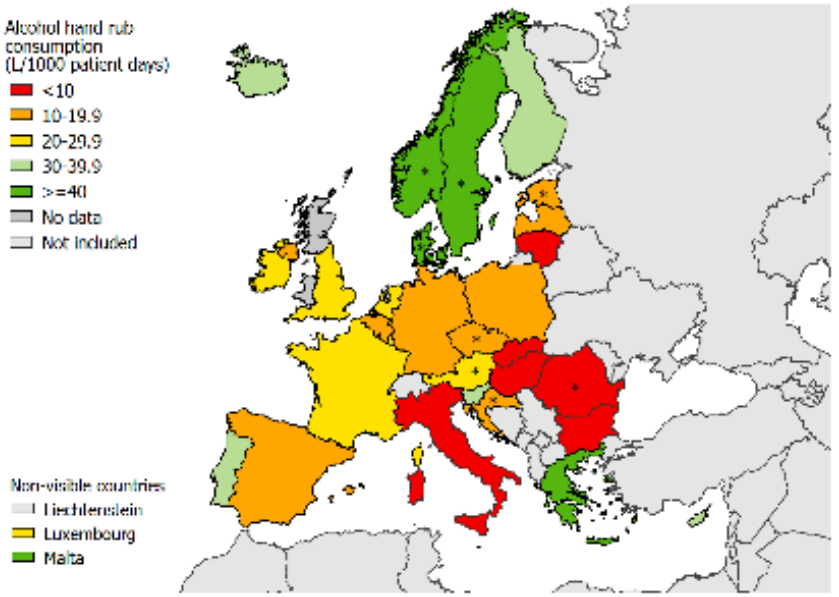
Trasmissione

Hospital

Antibiotic consumption

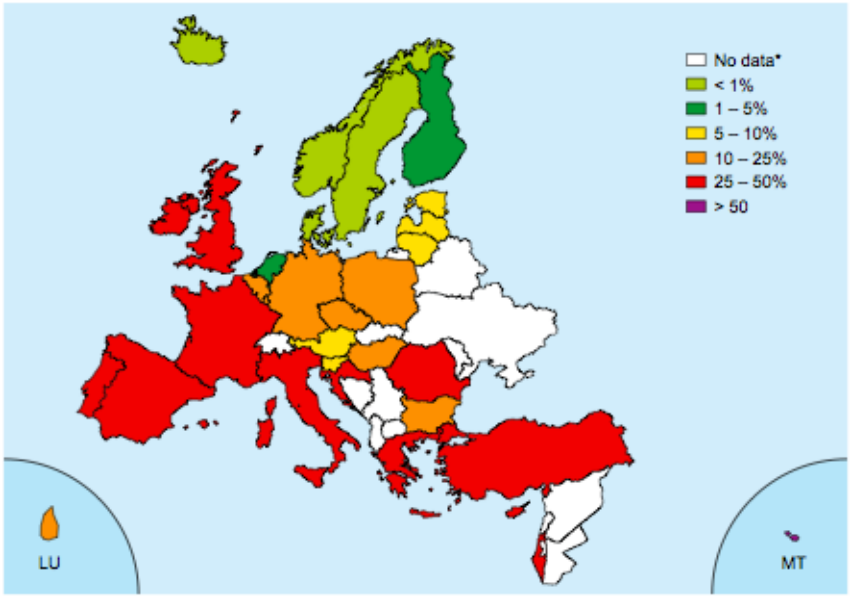


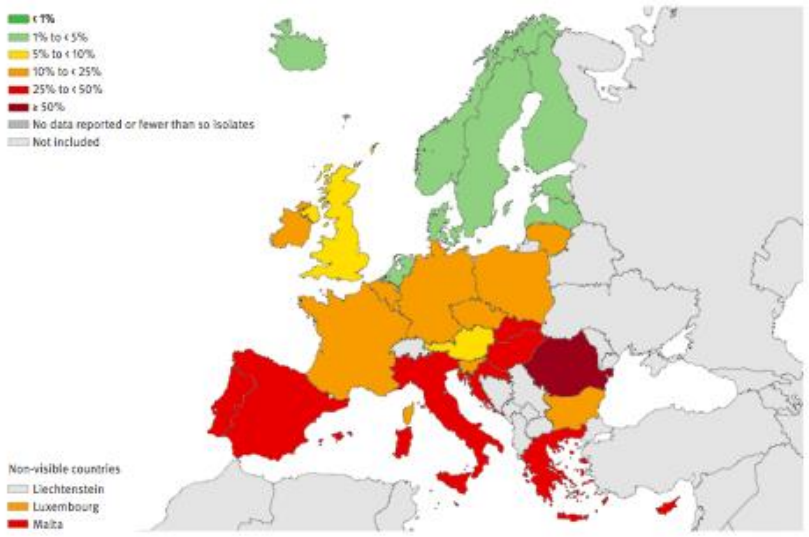
Hand hygiene



Staphylococcus aureus meticillino-resistente

2007 **2016**

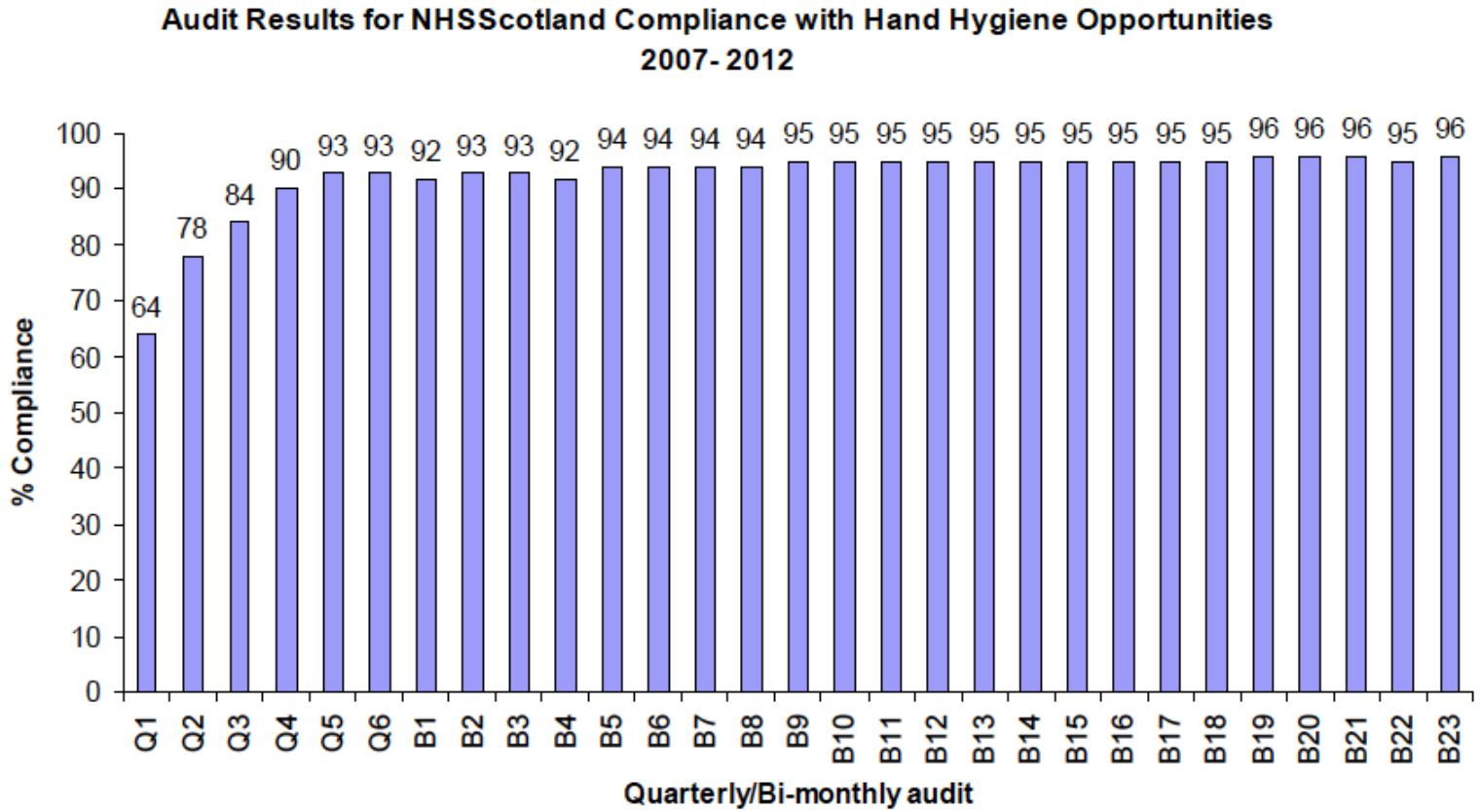




EARSNet 2007 e 2016

Esperienze di successo e ripetibili

Adherence to hand hygiene NHS Scotland



[Source: Health Protection Scotland, January 2013]

RESEARCH ARTICLE

Determinants of success and sustainability of the WHO multimodal hand hygiene promotion campaign, Italy, 2007–2008 and 2014

ML Moro [1], F Morsillo [1], S Nascetti [2], M Parenti [3], B Allegranzi [4], MG Pompa [5], D Pittet [6]

	Implementation level in 2014			
	Advanced (n = 12)		Intermediate/basic (n = 36)	
2007–2008 campaign	Median	Interquartile range	Median	Interquartile range
Hand hygiene compliance (observed/expected)				
at baseline	0.52	0.22[a]	0.37	0.28[a]
at follow-up	0.74	0.21	0.63	0.28
Ward infrastructure for hand hygiene score (questionnaire)				
at baseline	0.67	0.25[a]	0.33	0.50[a]
at follow-up	0.84	0	0.83	0.17
Knowledge score (questionnaire)				
at baseline	0.53	0.07	0.53	0.07
at follow-up	0.75	0.24	0.74	0.26
Perception score (questionnaire)				
at baseline	0.77	0.11[a]	0.69	0.06[a]
at follow-up	0.84	0.08	0.77	0.07
2014 survey	Median score/max achievable score	Interquartile range	Median score/max achievable score	Interquartile range
HHSAF	450/500	60	322.5/500	77.5

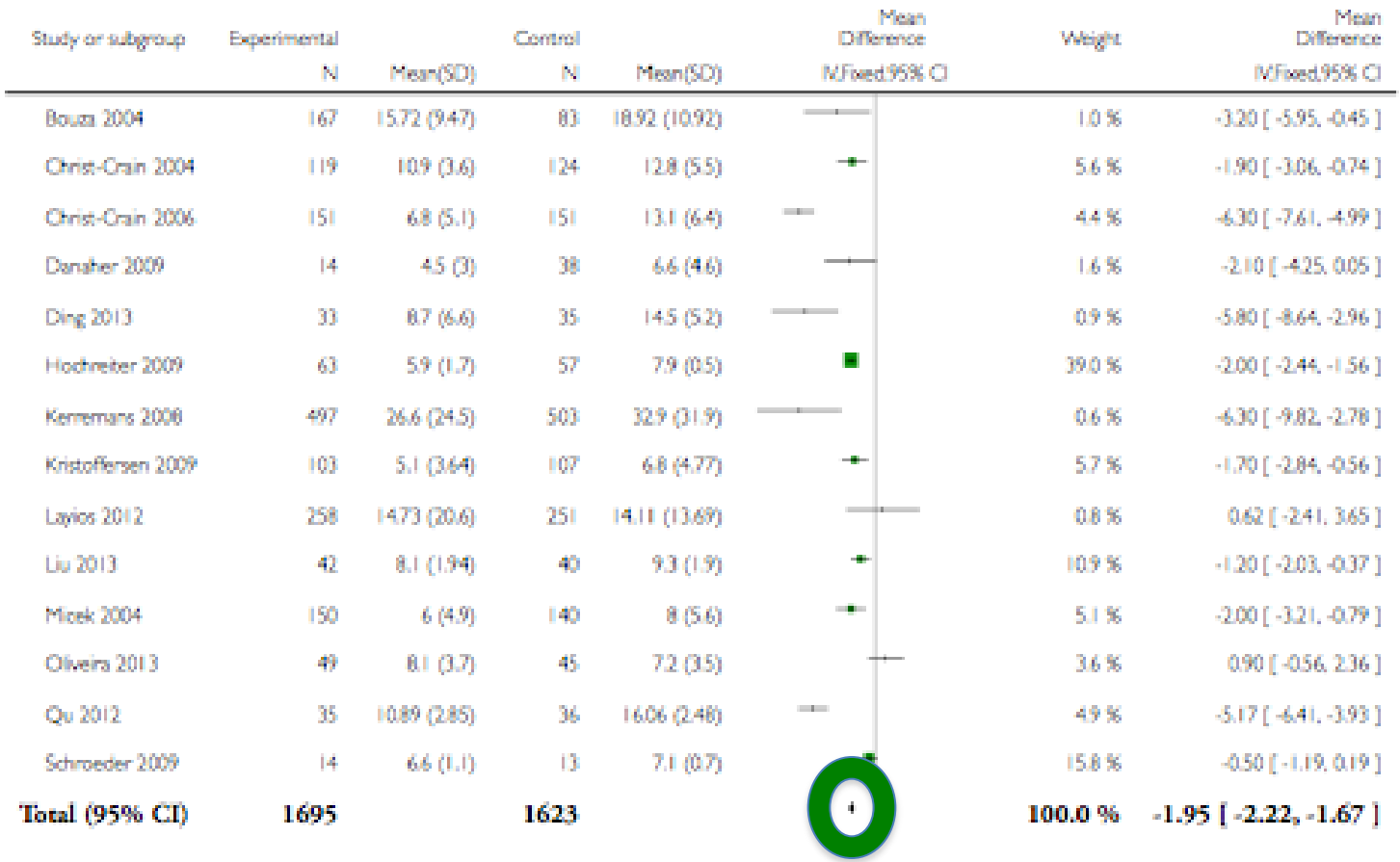
Moro ML, Eurosurveillance 2017

Cochrane Library
Cochrane Database of Systematic Reviews

Interventions to improve antibiotic prescribing practices for hospital inpatients (Review)

Davey P, Marwick CA, Scott CL, Charani E, McNeil K, Brown E, Gould IM, Ramsay CR, Michie S

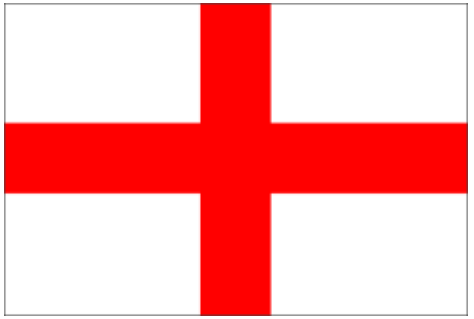
Antimicrobial stewardship



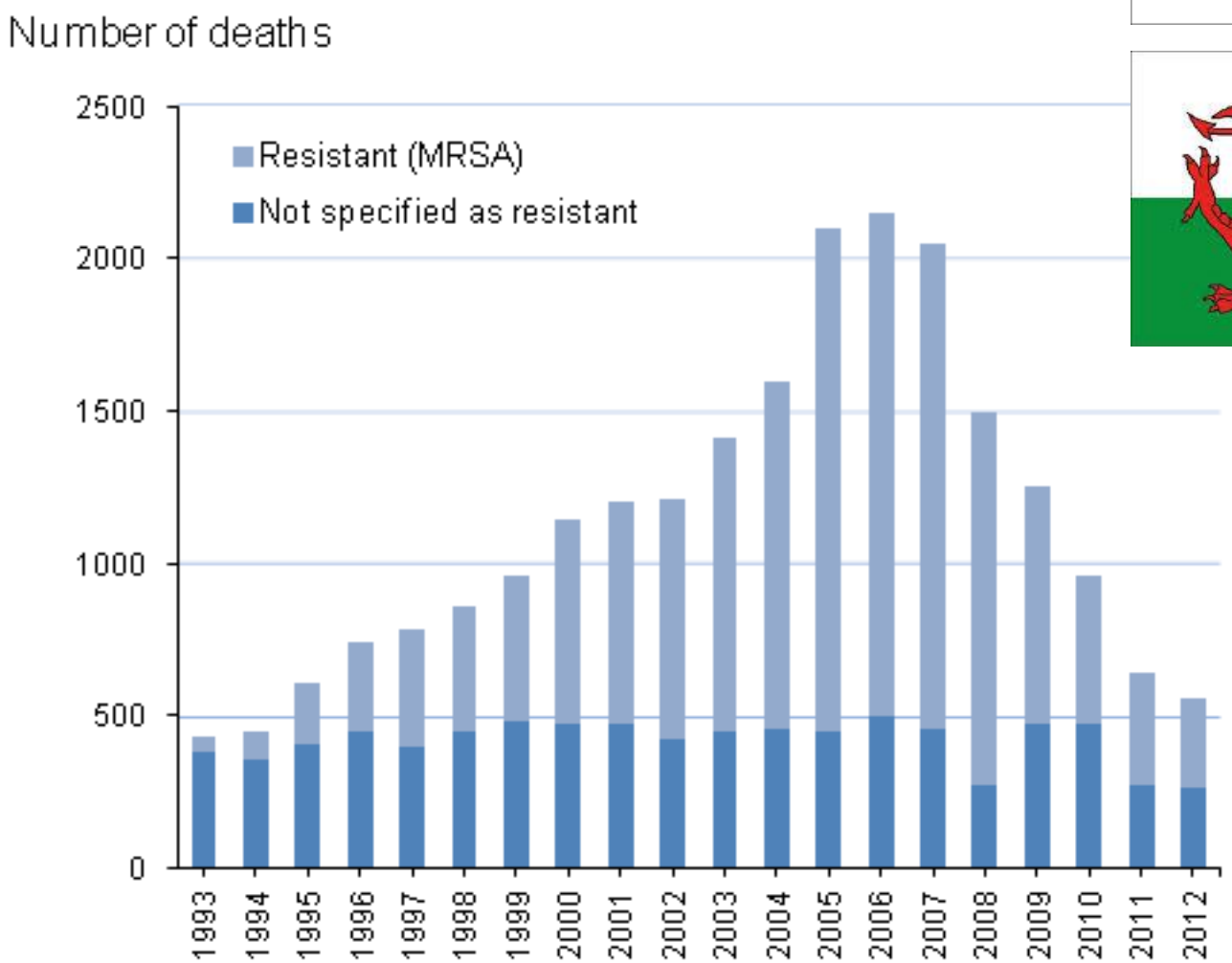
-2 days

Davey, Cochrane 2017

Decessi con MRSA: Inghilterra e Galles, 2008 - 2012







http://www.ons.gov.uk/ons/dcp171778_324558.pdf

Possibili interventi

- Migliorare l’adesione all’igiene delle mani
- Interventi sull’appropriatezza della terapia antibiotica in ospedale
- E’ necessario un approccio multispecialistico

Quali strategie?

Rete





ONE HEALTH

ONE PLANET ONE FUTURE


KEEP
CALM
AND DO
ANTIMICROBIAL
STEWARDSHIP

#HandHygiene #AntibioticResistance



FIGHT ANTIBIOTIC RESISTANCE

IT'S IN YOUR HANDS

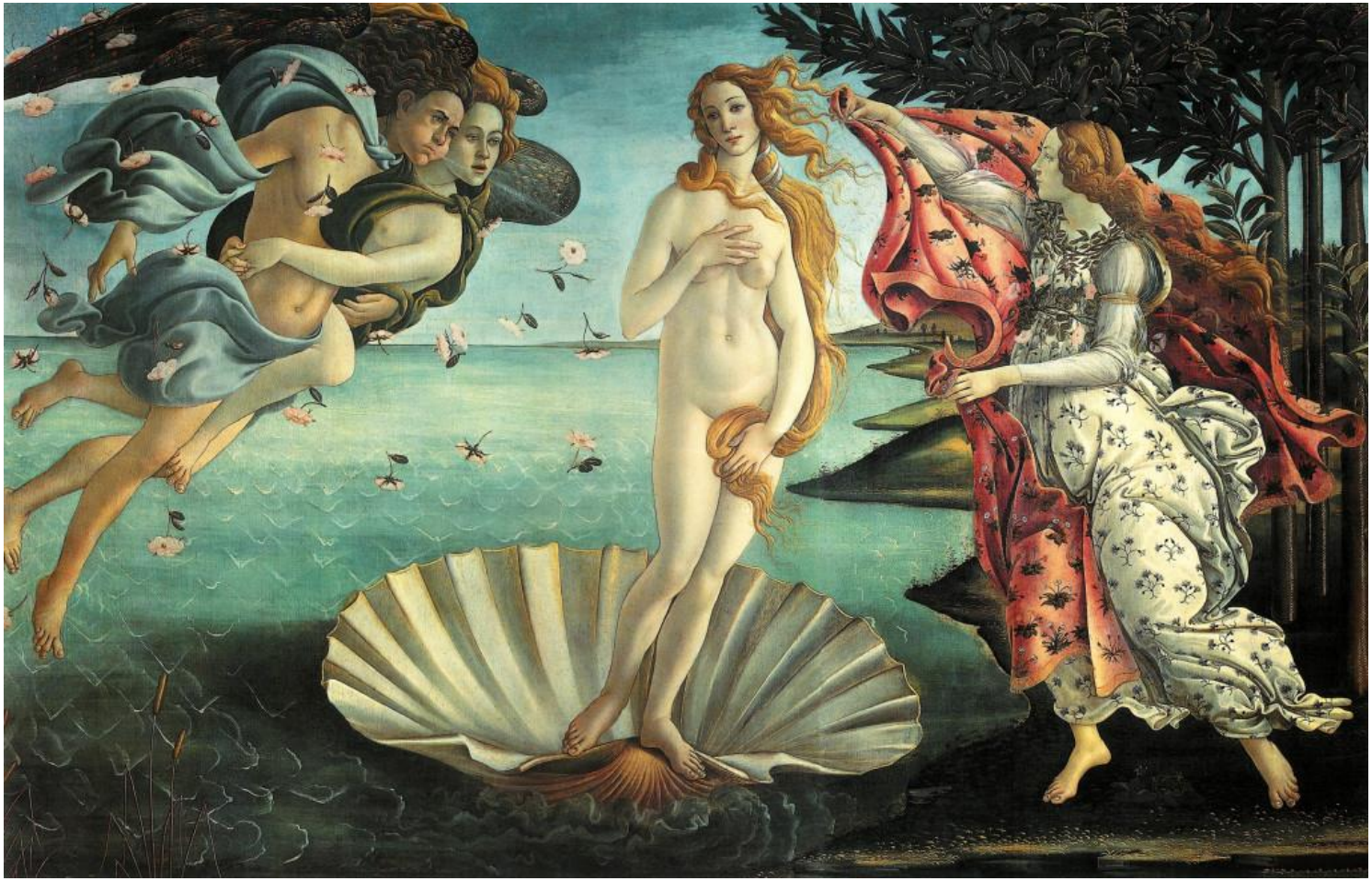
Progetto **Mu**lti **S**ocietario **I**taliano sul **C**ontrollo dell'**A**ntibiotico **Re**sistenza

Mu SIC ♫ Re



Un documento per una responsabilità condivisa

The future?



Conclusioni

1. Migliorare l'uso di antibiotici
   - in comunità
   - in ospedale
2. Migliorare l'igiene delle mani
3. Rete collaborativa e progetti mirati

si … può … fare !!!

