Global Point Prevalence Survey of Antimicrobial Consumption and Resistance in hospitals worldwide



Dedicated to the entire Global-PPS network !

Call to Action on Antimicrobial Resistance 2018

Accra, Ghana

In partnership with the

ACG Interagency Coordination Group on Antimicrobial Resistance



Ghana Government Royal Thai Government











If You Can't Measure It, You Can't Improve It

(William Thomson, Lord Kelvin)



An innovative worldwide accessible web-based Global-PPS TOOL

> Standardized approach Collect consistent, valid and comparable antimicrobial prescribing data A simple method



Posters and leaflets to promote the study

PPT slides to explain the method



Identify targets to improve quality of antimicrobial prescribing: Prolonged surgical prophylaxis in 15 hospitals in The Philippines in 2017



Assess effectiveness of interventions through repeated Global-PPS



Assess effectiveness of interventions through repeated Global-PPS

	Tertiary care hospital Lagos Intervention in 2016		Tertiary care hospital Abuja No Intervention	
	2015	2017	2015	2017
Antibiotic prevalence adult wards	80.6%	67.0% 🖡	58.7%	61.2%
Antibiotic prevalence in pediatric wards	89.7%	59.2% 🖡	50.9%	68.3%

Quantity of antimicrobial prescribing in two Global-PPS participating Nigerian hospitals

Degree of participation or enrollment as of today



Global-PPS integrated in Chilean Network Collaborative Group on Antimicrobial Resistance Chilean Society of Infectious Diseases



Figura 1. AC = alta complejidad; MC= mediana complejidad; IAC = institucional alta complejidad; UAC=universitario alta complejidad.

<u>40 Hospitals</u> Public Hospitals Private Clinics Teaching Hospitals Military Hospitals



Continuous work towards sustainability and scale up through COMMUNICATION and NETWORKING

ECCMID 2016

Scientific papers using Global-PPS data

Epidemiology and Infection

cambridge.org/hyg

Original Paper

Cite this article: Al-Taani GM et al (2018). Longitudinal point prevalence survey of antibacterial use in Northern Ireland using the European Surveillance of Antimicrobial Consumption (ESAC) PPS and Global-PPS tool. Epidemiology and Infection 1-6. https:// doi.org/10.1017/S095026881800095X

RESEARCH ARTICLE

Longitudinal point prevalence survey of antibacterial use in Northern Ireland using the European Surveillance of Antimicrobial Consumption (ESAC) PPS and Global-PPS tool

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www.globalpps.com/dissemination/ peer-reviewed-articles/

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Original Article

A Point Prevalence Survey of Antimicrobial Prescribing in Four Nigerian Tertiary Hospitals

Open Access

CreetMark

Comparative point prevalence survey of antimicrobial consumption between a hospital in Northern Ireland and a hospital in Jordan

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Abstract

Background: To assess antimicrobial prescribing in a Northern Ireland hospital (Antrim Area Hospital compare them with those of a hospital in Jordan (Specialty Hospital).

Methods: Using the Global-PPS approach, the present study surveyed patients admitted to the hosp the prescribed antibiotics, and a set of quality control indicators related to antibiotics.

Results: Ultimately, 444 and 112 inpatients in the AAH and the Specialty Hospital, respectively, were the medical group, 165 inpatients were prescribed 239 antibiotics in the AAH, while 44 patients in th Abadavia AO4 Ocupeals ET

Antimicrobial consumption and resistance in adult hospital inpatients in 53 countries: results of an internet-based global point prevalence survey

Ann Versporten, Peter Zarb, Isabelle Caniaux, Marie-Françoise Gros, Nico Drapier, Mark Miller, Vincent Jarlier, Dilip Nathwani, Herman Goossens on behalf of the Global-PPS network*

Summarv

Background The Global Point Prevalence Survey (Global-PPS) established an international network of hospitals to measure antimicrobial prescribing and resistance worldwide. We aimed to assess antimicrobial prescribing and resistance in hospital inpatients.

Methods We used a standardised surveillance method to collect detailed data about antimicrobial prescribing and resistance from hospitals worldwide, which were grouped by UN region. The internet-based survey included all inpatients (adults, children, and neonates) receiving an antimicrobial who were on the ward at 0800 h on one specific day between January and September, 2015. Hospitals were classified as primary, secondary, tertiary (including infectious diseases hospitals), and paediatric hospitals. Five main ward types were defined: medical wards, surgical wards, intensive-care units, haematology oncology wards, and medical transplantation (bone marrow or solid transplants) wards. Data recorded included patient characteristics, antimicrobials received, diagnosis, therapeutic indication according to predefined lists, and markers of prescribing quality (eg, whether a stop or review date were recorded, and whether local prescribing guidelines existed and were adhered to). We report findings for adult inpatients.

Lancet Glob Health 2018; 6:e619-29 **Published Online** April 19, 2018 http://dx.doi.org/10.1016/ S2214-109X(18)30186-4 * Members listed at the end of

the paper Laboratory of Medical

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Networking : Global-PPS as intermediary

• Regional coordinators !



See <u>www.global-pps.com</u>

Awards obtained through the Global-PPS





Best oral presentation, Nigeria

Best poster presentation, Saoudi Arabia











LAGOS UNIVERSITY TEACHING HOSPITAL ANTIMICROBIAL STEWARDSHIP COMMITTEE APPRECIATES GLOBAL-PPS







See also: Versporten A, Zarb P, Caniaux I, et al. Antimicrobial consumption and resistance in adult hospital inpatients in 53 countries: results of an internet-based global point prevalence survey. Lancet Glob Health 2018.