

GLOBAL POINT PREVALENCE SURVEY OF ANTIMICROBIAL CONSUMPTION AND RESISTANCE (GLOBAL-PPS)















Longitudinal Global
Point Prevalence Surveys
in Nigeria. Progress,
challenges and opportunities.

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The Global-PPS is coordinated by the University of Antwerp and supported by bioMérieux





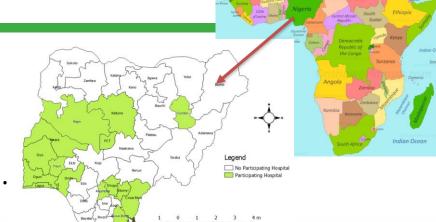


The global-PPS in Nigeria



Background: www.global-PPS.com

Aims: Quantify prescribing patterns of antimicrobial use (AMU) in Nigeria.



Methods:

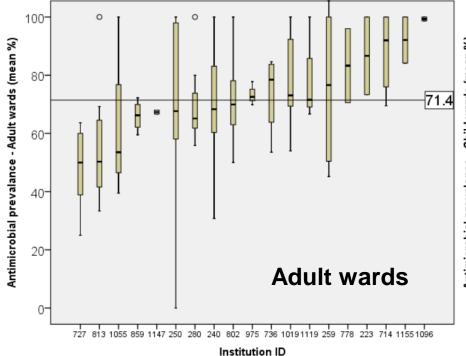
- Global point prevalence surveys were conducted from 2015 to 2019.
- 20 hospitals with multiple participations (44 surveys) from 14 different counties in North and South Nigeria.
- All patients present in the wards at 8 a.m. were included.
- Detailed data collected for patients on antimicrobials: AMU patterns and antibiotic quality indicators.
- Prevalence rates were weighted by department type, and ranges provided by year.

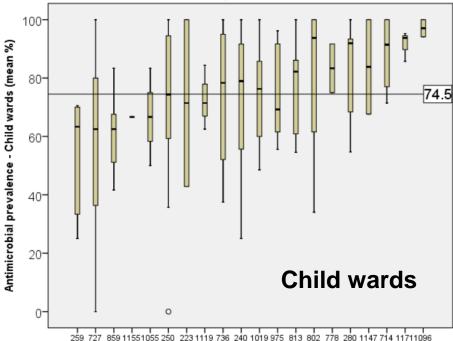


Antimicrobial use prevalence 2015-2019

	N	N	Mean treated patients % (95%CI)		
Year	Surveys	patients	Adult wards	Child/Neo wards	
2015	4	840	75.4 (58.5-92.3)	74.7 (62.5-86.9)	
2017	10	2049	64.6 (56.4-72.7)	69.2 (59.9-78.5)	
2018	11	2332	70.2 (61.4-79.0)	73.4 (64.4-82.4)	
2019	19	2684	77.2 (71.2-83.2)	79.2 (73.5-84.8)	

- Overall high AMU rates!
- Significantly different AMU rates between the hospitals!

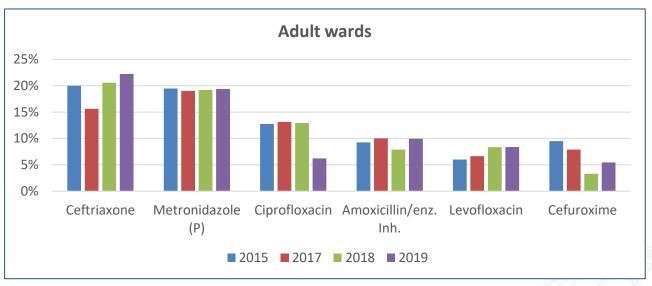


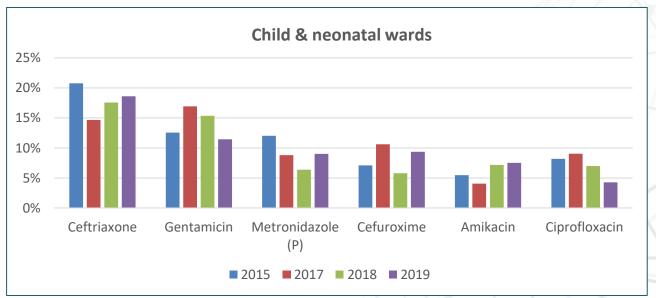


Institution ID



Most frequently prescribed antibiotics for therapeutic use (CAI and HAI)







Quality indicators for antibiotic therapeutic prescribing (CAI & HAI) in Nigeria

Adult wards

	2015	2017	2018	2019
Antibiotic Quality Indicator	(4 hosp)	(10 hosp)	(10 hosp)	(14 hosp)
Prescence of justification of antibiotic	49.5	69.3	70.8	79.9
Presence of stop/review date	26.0	28.0	45.0	64.5
Guidelines missing	34.3	74.2	76.7	84.6
Targeted prescribing	19.5	3.5	6.6	6.8

Child & neonatal wards

2 times 6 newly joined hospitals from different counties (in 2017 and 2019)

	2015	2017	2018	2019
Antibiotic Quality Indicator	(4 hosp)	(10 hosp)	(10 hosp)	(14 hosp)
Prescence of justification of antibiotic	56.8	78.3	79.0	86.8
Presence of stop/review date	21.3	29.3	46.5	43.5
Guidelines missing	21.9	70.2	57.3	56.9
Targeted prescribing	15.3	6.1	7.0	6.8

Microbiology laboratories exist but are underutilized

Absence of use of biomarker data



Findings

- Increase of hospital sites with motivated teams over time.
- Overall similar high rates of antimicrobial prescribing for adults and children/neonates over time.
- High broad-spectrum prescribing (ceftriaxone).
- Thigh use of parenteral metronidazole.
- Poor outcomes of antibiotic quality indicators.



The way forward!

- High level discussion and policy to encourage laboratory use!
- Develop and share empiric antibiotic treatment guidelines.
- Enhance antimicrobial stewardship (AMS) actions: install a system to enhance the documentation of a stop / review date.
- Collaboration Global-PPS should be considered essential to establish and maintain informed AMS activities in Nigeria.
- All Nigerian hospitals are welcome to participate! Contact Global-PPS@uantwerpen.be