

Antibiotics and Antibiotic Resistance

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Physicians' knowledge, perceptions, and attitudes toward antibiotic prescribing in Alexandria Fever Hospital, Egypt

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Aim: The aim of the study was assessing knowledge, attitude and current practice of physicians towards antibiotic prescribing in Alexandria Fever Hospital.

Methods: Self administering questionnaire published as a Google form in the hospital official Facebook group. The questionnaire was designed after reviewing the literature.

Results: Physicians are aware of antibiotic resistance problem in their hospital and in the country although they prefer over prescribing rather than under prescribing of antibiotics. Although 50% indicated that they are confident in the area of antibiotic resistance 45% did not receive a regular training in that area. All physicians agreed that inappropriate use of antimicrobial agents may result in antimicrobial resistance. The most of physicians (75%) agreed that the main cause of inappropriate use of antibiotics is lack of effective hospital polices and (80%) believed that their education will help in controlling of antibiotics resistance.

Conclusion: There is a considerable unmet training and education needs for physicians in the area of antimicrobial prescribing therefore, there is a need to increase the teaching and training courses about antibiotics in the hospital and encourage the physicians to attend. The hospital antimicrobial guidelines need revision and to be well published between physicians.

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Antimicrobial stewardship and resistance: What are the different roles of global, regional and national level policies?

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Background & Aim: Antimicrobial Resistance (AMR) is now recognized as very real threat to global health and security. As a result there are increasing numbers of policy documents on the subject. This report analyses policies on AMR at global, regional and national levels with a view to making recommendations as to how policy might be improved. The UK, India and Ghana are used as country case studies.

Methods: A systematic literature review was undertaken searching for policy documents at global and regional levels and at national level for the three countries studied. Policies were analyzed using Walt and Gibson's policy analysis triangle.

Results: The literature review revealed 14 global level and 13 regional level policy documents. 2 national level policies were found for the UK, 3 for India and 1 for Ghana.

Conclusion: Policies at all levels recognize the importance of good antimicrobial stewardship, increasing surveillance and improving infection control in combating AMR. The intended role of policy at each level needs to be clarified. Global policy should set out broad vision and national policy should focus on implementation. Regional policies could be used to bridge the gap between global vision and national implementation and provide resources which assist in developing national plans which are context specific. Poverty and the role of health systems in AMR are neglected issues which need to be addressed in policies at all levels. International collaboration is essential to ensure consensus over global, regional and country level policy.

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