AMR Research in Myanmar: Current Situation, Challenges and Ways Forward

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Presentation Outlines

AMR Research Highlights

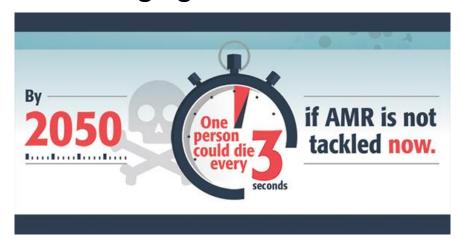
Challenges

Way Forward

Current situation of AMR in Myanmar

Global Action

 At the 68th World Health Assembly in May 2015, a global action plan on AMR (GAP AMR) - acknowledgement of this emerging crisis



SEAR Flagships





- Addressing the persisting an emerging epidemiological an demographic challenges.
- Advancing universal health coverage and robust health systems.
- Strengthening emergency ri management for sustainable development
- Articulating a strong Regional voice in the global health agenda.
- Prevention of noncommunicable diseases through multisectoral policies and plans with focus on "best buys"
- The unfinished MDGs agenda: Ending preventable maternal, newborn and child deaths with focus on neonatal deaths
- Universal Health Coverage with focus on human resources for health and essential medicines
- Building national capacity for preventing and combating Antimicrobial Resistance
- Scaling up capacity developme countries
- Finishing the task of eliminatin (Kala-azar, Leprosy, Lymphatic
- · Accelerating efforts to End TB



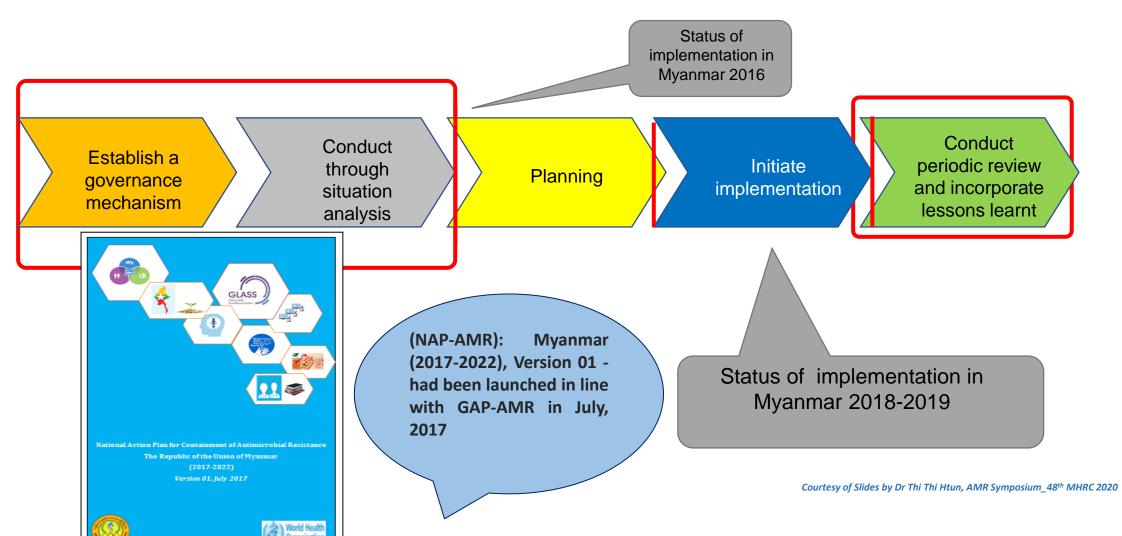


ON ANTIMICROBIAL RESISTANCE

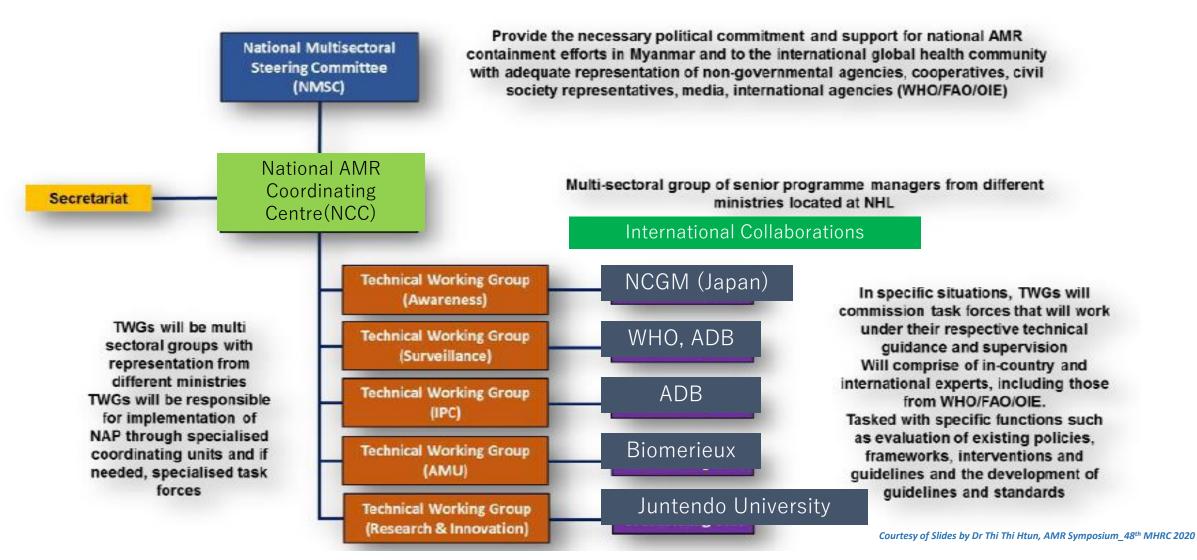


All Member States should develop their own, tailor made National Action Plans on AMR (NAP AMR), duly aligned with the principles and approaches espoused by the GAP AMR by May 2017.

Steps in development and implementation of NAP-status in Myanmar

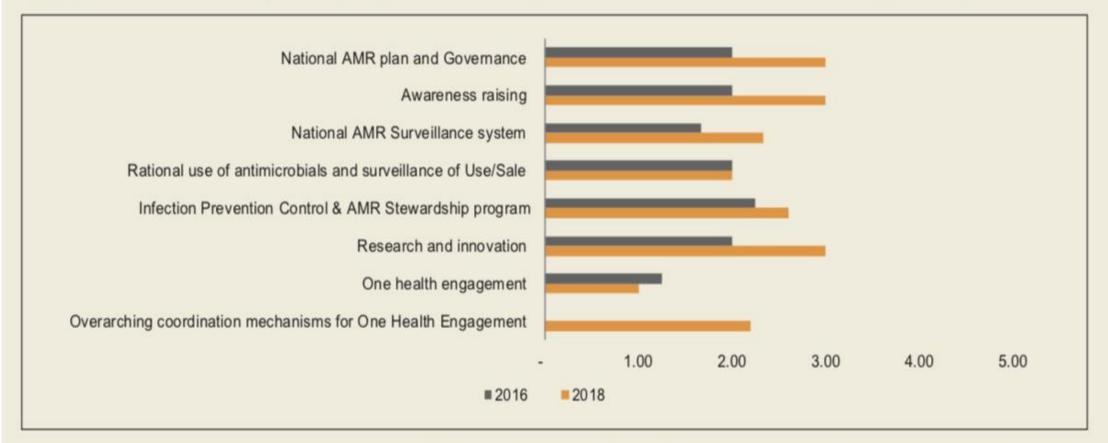


NMSC, NCC and International Implementation Partners



Situational analysis of antimicrobial resistance in the South-East Asia Region, 2018 (WHO)

Fig 19: Situational analysis of progress on AMR prevention and containment in Myanmar, 2016–2018



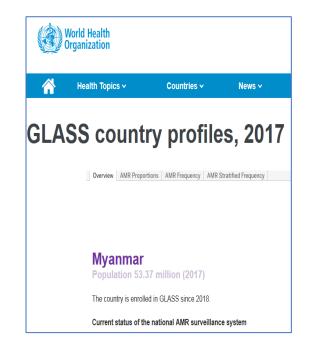
The figure shows an average of phase-grading for all indicators in different focus areas, purely for pictorial representation.

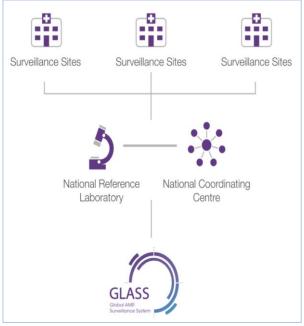
Courtesy of Slides by Dr Thi Thi Htun, AMR Symposium 48th MHRC 2020

National AMR Surveillance Guideline

Global Antimicrobial Resistance Surveillance System (GLASS)

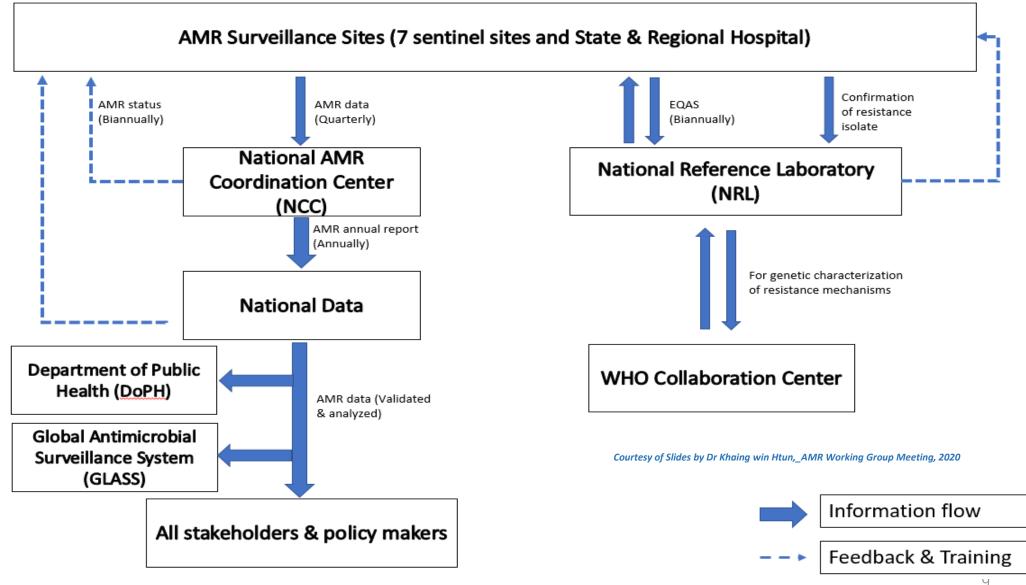
- Myanmar first country to develop National AMR Surveillance Guideline among SEARO countries
- Workshop on National AMR Surveillance Guideline Development -Held on 7-9 October, 2019
- General objective to support and implement the Myanmar activities to implement the NAP for AMR Containment
- Draft guideline published



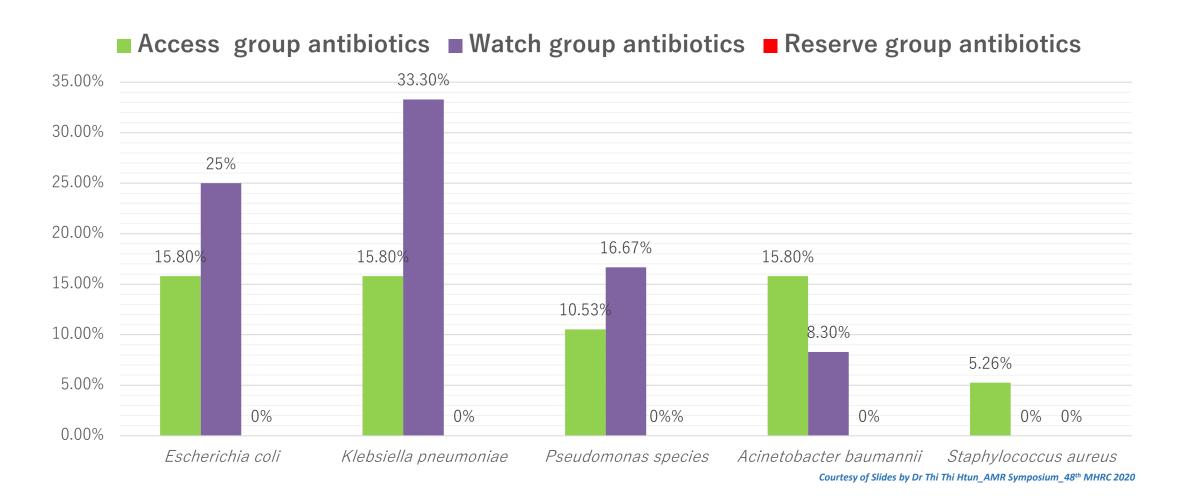


Courtesy of Slides by Dr Thi Thi Htun_AMR Symposium_48th MHRC 2020

Myanmar National AMR Surveillance Guideline (Revised on 31-1-2020)



Current Antibiotic resistance in line with AWaRe group categorization



Highlights on AMR Research



AMR Research in Myanmar

Multi-stakeholders Approach

- Department of Medical Research
- Department of Public Health (Disease Control Programme)
- Department of Medical Services (NHL, Hospitals)
- Department of Human Resources for Health (Universities)
- Department of Food and Drug Administration
- Livestock Veterinary and Breeding Dept.
- Agricultural and Aquaculture Sectors
- Local NGOs- MMA, MPHA

in collaboration with: International Institutions and Universities

Funding Source: WHO/International Research Grants/MOHS IR Grants/DMR Grants



Stakeholder
Consultation meetings
on AMR
(September
2019/January 2020)



Research Prioritization Workshop on Antimicrobial Resistance in Myanmar: 7-8 November 2019



Report on Research
Prioritization
Workshop
(December, 2019)







Components of Research Findings on Antimicrobial Resistance in Myanmar (2009-2019)

Version -01



Department of Medical Research Ministry of Health and Sports

December, 2019

Report

Research Prioritization Workshop on Antimicrobial Resistance in Myanmar

Department of Medical Research

Ministry of Health and Sports

Becamber 2019





Sr. No.	Research Area (Priority Group I)	Related Strategic Objectives of National Action Plan for AMR
1	Factors influencing on adherence to antibiotic therapy at private clinics (Doctors' and patients' perspective)	AMR Awareness
2	Can behavior change intervention affect the antibiotic selling practice of pharmacy?	AMR Awareness and Antimicrobial Usage
3	Antimicrobial resistance pattern and associated risk factors among Neisseria gonorrhoeae infected patients attending STD clinics	AMR Surveillance
4	Currently circulating serotypes and antibiotic resistant pattern of Streptococcus pneumoniae in post PCV vaccination era among under 5 children	AMR Surveillance
5	Effectiveness of targeted surveillance for control of MRSA in tertiary care hospital setting	Infection Prevention & Control
6	Health care associated infections in tertiary level hospitals and it's causes	Infection Prevention & Control
7	Challenges of selected tertiary and secondary hospitals to establish effective IPC program by WHO core components	Infection Prevention & Control
8	Challenges and barriers in the establishment of antibiotic guidelines and antibiotic stewardship program at the public and private hospitals	Antimicrobial Usage
9	Pattern and trend of antimicrobial usage in food producing animals	Antimicrobial Usage
10	Level of antimicrobial residues in food from animal origin (egg, milk, meat, aquaculture, apiculture)	Antimicrobial Usage

* (10) Priority Group II Research Areas and (14) Priority III Research Areas were also identified (Detail titles not shown)



AMR Research in Myanmar Health Research Registry



Research Areas

- Awareness raising and Optimizing use of antimicrobial medicines
- Emergence of resistance in priority pathogens/ critical antimicrobials
- Effective sanitation, hygiene and infection prevention measures
- AMR on Public Health Importance Microorganisms eg. drug resistant TB, Malaria and HIV
- Surveillance and disease burden studies
- Antibiotics and antimicrobial resistance genes
- Research on One Health

https://www.mhrr-mohs.com









Improving health systems through research

Asia Regional SORT IT training on antimicrobial resistance Kathmandu, Nepal, 2019-2020

Asia Regional SORT IT training on antimicrobial resistance Kathmandu, Nepal, 2019-2020

TDR receives £8.2 million boost for antimicrobial resistance operational research training

TDR news item 14 December 2018

TDR's Structured Operational Research and Training Initiative (SORT IT) has won a grant for £8.2 million from the UK National Institute for Health Research (NIHR). The funding is for operational research training related to antimicrobial resistance in 6 low- and middle-income countries.

Professor Dame Sally Davies, England's Chief Medical Officer, in making this funding announcement 12 December, said, "Containing and controlling antimicrobial resistance (AMR) as a global health threat will require investment in research at all levels from 'bug to bedside'. This new partnership will fund research that aims to transform AMR policy and practice, and turn the tide against antimicrobial drug resistant infections."

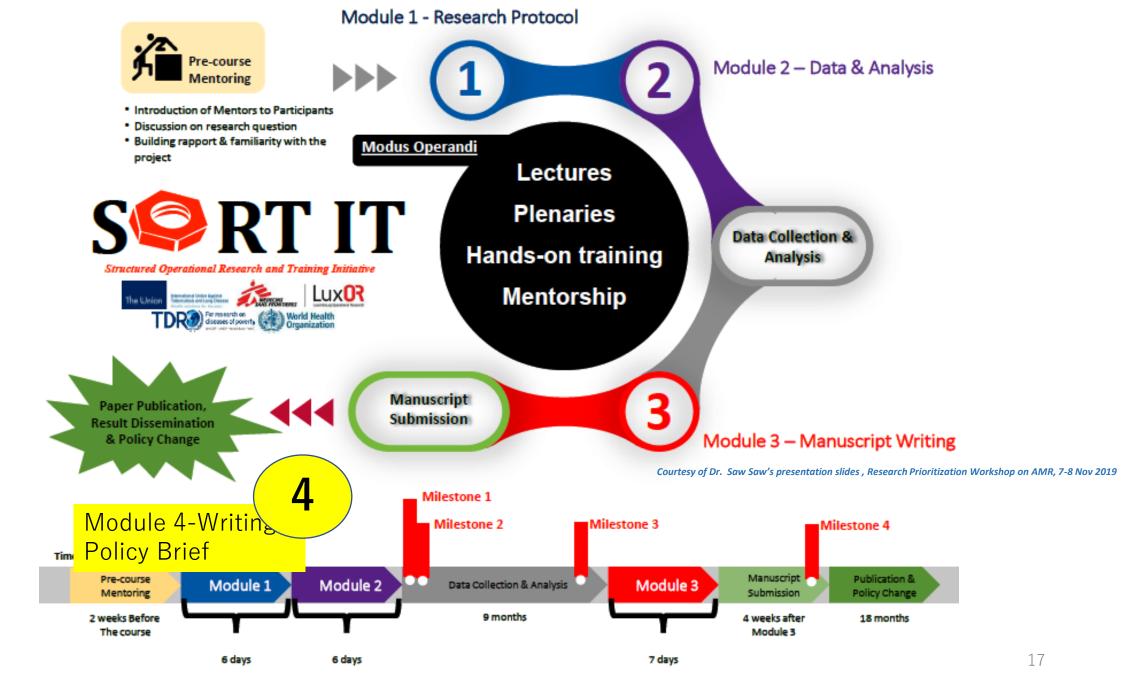
Antimicrobial resistance has the potential to kill as many as 10 million people each year and cost the world economy as much as US\$ 100 trillion. AMR allows infections to persist and spread within and across populations. Standard antibiotic treatments then become ineffective, making even routine surgery potentially life-threatening.

AMR SORT IT will empower countries to make better use of the information they collect to make evidence-based decisions and contribute to preventing and controlling the global spread of AMR.

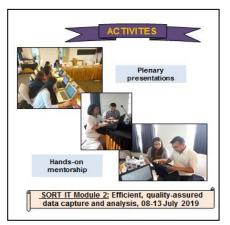
TDR Director John Reeder said, "The UK Government has been a The control of the co

SORT IT course, Myanmai

ctrong long torm









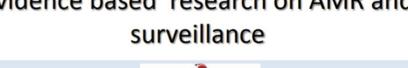
Regional SORT IT AMR

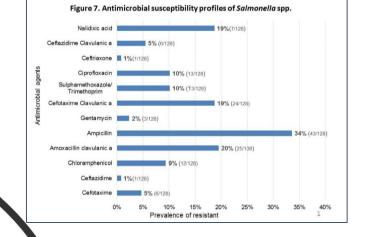
No.	Research Titles
1	Surveillance of antimicrobial resistance in wound infections at Yangon General Hospital, Myanmar in 2018: A mixed-methods study
2	Infection Prevention and Control in four Centrals Hospitals in Yangon, Myanmar: where do we stand?
3	Prevalence and associated factors of methicillin resistant isolated Staphylococcus aureus during 2018-19, in Myanmar
4	Assessing current practice of water testing in hospitals in 2018- 2019
5	Neonatal sepsis, antibiotic susceptibility pattern and treatment outcomes among neonates treated in two tertiary care hospitals in Yangon, Myanmar from 2017-2019
6	Country-wide antibiotic consumption in public health hospitals before and after decentralisation of drug procurement in Myanmar

prevalence of AMR E coli from farms, slaughterhouses Total E.coli and their AMR (86 farm samples + 11 abattoir samples) • No significant difference in total E.coli counts from samples taken from farms and abattoirs • Farm-boot-swab samples contained higher E. coli counts than farm drainage-sample •Resistance pattern with 7 different antibiotics seemed to show a similar trend

AMR in Animal Health Sector

Evidence based research on AMR and surveillance





Prevalence of AMR

Salmonella (pig farm)













An Integrated management-based approach for surveillance and contro of zoonoses in emerging livestock systems (ZELS) 2015-2020

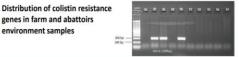
- > FOCUS: AMR zoonoses in Pig Supply chain
 - Salmonella
 - Streptococcus suis
 - E.coli





Courtesy of Slides by Dr Min Thein Maw, AMR Symposium 48th MHRC 2020

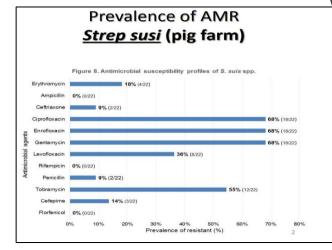
prevalence of mcr-genes (colistin resistance genes)





	Farms (n,%)									Abattoirs (n,%)				Grand
Gene pattern (n,	Boot swab (n=54)					Drain (n=41)			Drain (n=19)				Total	total
%)	Winter (n=18)		Rainy (n=18)	Total (n=54)	Winte r (n=12)	Summer	Rainy (n=14)	Total (n=41)	Winte (n=3)	r Summer (n=7)	Rainy (n=9)	Total (n=19)	(n=114) (n,%)	(n=141) (n,%)
r-1	16	6	7	29 (53.7)	7	6	5	18 (43.9)	1	3	5	9 (47.4)	56 (49.1)	56 (40)
cr-1, mcr-3	1	6	8	15 (27.8)	1	3	4	8 (19.5)					23 (20.2)	23 (16)
r-1, mcr-8			1	1 (1.9)			1	1 (2.4)					2 (1.8)	2 (1)
cr-1, mcr-3, mcr-		2	1	3 (5.6)		2	2	4 (9.8)			1	1 (5.3)	8 (7)	8 (6)
cr - any				48 (89)				31 (75.6)				10 (52.7)	89 (78.1)	89 (63)

- High prevalence of colistin resistant environment samples (114/141, 81%)
- In total: we identified the presence of mcr genes in 89/114, (78.1%) in samples



Challenges

Challenges - 1

- Decreasing momentum of AMR activities during COVID 19 pandemic
- Underdeveloped antibiotic stewardship programs
- Limited availability of laboratory facilities for C&S
- Antibiotic use in clinical practice is high, and broad...
- Suboptimal facilities enhance transmission of resistant organisms between patients
- Antibiotics easily available over the counter without prescription
- Weak regulation of production, import and sale of antibiotics

Challenges - 2

- Counterfeit & substandard antibiotics are available & used in areas where regulation & enforcement are weak
- Monitoring of measures for Infection prevention & control insufficient
- Need to educate for awareness of burden & seriousness of AMR among health care workers, public at large and other stakeholders from different sectors
- Need to strengthen of activities on Research and Innovation
- Regional and extra-regional Networking, multi-center AMR research activities and surveillance

Way Forward

WAY FORWARD 1

- To adapt WHO AWaRe classification in National Essential Medicines List and standard treatment guidelines by Dept. of Medical Services & Essential Medicine project
- To strengthen hospital level AMSP following development of National Antimicrobial stewardship policy
- To develop National Antimicrobial consumption and use with monitoring and evaluation system by global point prevalence surveys

WAY FORWARD 2

- Encouraging collaborations of Departments under MOHS, MoALI, MOE, NGOs, INGOs, Private Sectors and International Institutions/Universities for enhancing One Health Approach
- Dissemination of the knowledge and research findings on AMR in the public talks, scientific talks, symposia, conferences
- ➤ Seeking of support/grant/collaborations for conducting large scale

 AMR research studies



Thank You