

**Controlling the Antimicrobial Resistance:
*Analysis of Situation in Russia***

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**Do we really know where the main problems
and their causes are**



Newspaper «Izvestiya»

(referring on official report of the Russian Federal Service for Surveillance on Consumer Rights Protection and Human Wellbeing (Rospotrebnadzor) in 2015)

- **The annual number of hospital acquired infections in Russian Federation decreased by 20% (to 24,300 cases) during the last decade**
- **According to the official data, “...the risk to get infection in Russian medical centers is just 0,1%, that is lower than in many developed countries”**

Estimated annual number of nosocomial infections in Russia
2,000,000

Gram(+)
(25%)
500,000

Gram(-)
(75%)
1,500,000

S.aureus
(77%)
385,000

Enterococcus spp.
(23%)
115,000

Enterobacteriaceae
(47%)
700,000

P.aeruginosa
(36%)
540,000

Acinetobacter
(13%)
200,000

Другие
(4%)
60 000

MRSA
(50%)
190,000

MSSA
(50%)
190,000

VSE
(>95%)
110,000

VRE
<5,000

ESBL+
(~70%)
500 000

ESBL-
(~30%)
200 000

3 MOST PROBABLE CAUSES OF SUCH SITUATION WITH RESISTANCE IN RUSSIA

**Real practice of use
of antimicrobials
(mostly in hospitals)**

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**Low quality
generics**

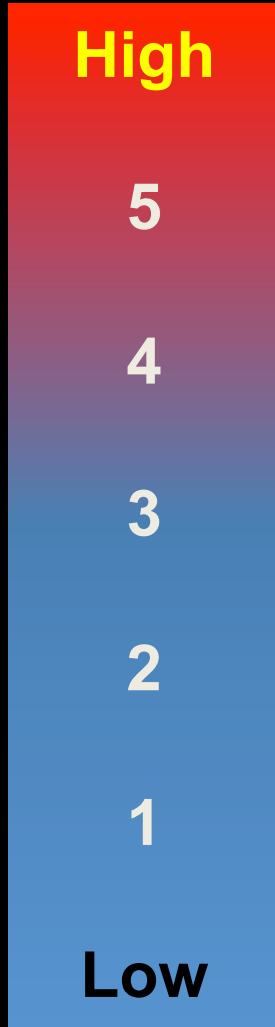
What we want to do and what we can do about antimicrobial resistance ?

Do nothing

Try to do everything

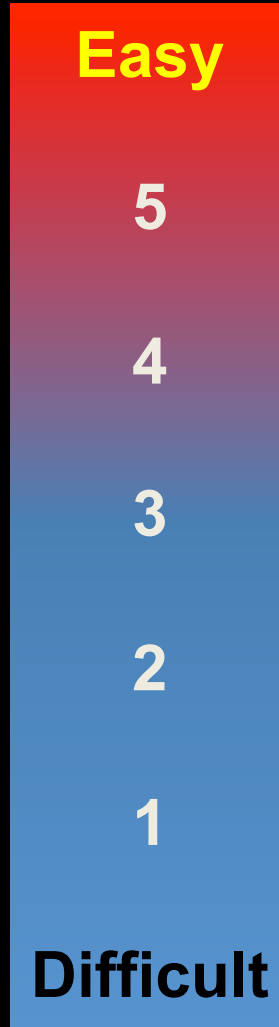
Concentrate on what we can do

Importance



+

Performance



=

For IAC:

- 1) monitoring AMR*
- 2) Improving diagnostics of AMR*

AT THE MOMENT WE HAVE THE DATA ON RESISTANCE OF:

Community-acquired

Pathogen	Amount of data
<i>S. pneumoniae</i>	++++
<i>S. pyogenes</i>	+++
<i>H. influenzae</i>	++++
<i>S. aureus</i>	++ (old)
<i>Enterobacteriaceae</i>	++
<i>N. gonorrhoeae</i>	+ (old)
<i>Mycoplasma</i>	in progress
<i>Chlamydia</i>	in progress

AT THE MOMENT WE HAVE THE DATA ON RESISTANCE OF:

Nosocomial

Pathogen	Amount of data
<i>S. aureus</i>	++++
CNS	+++
<i>Enterococcus</i>	+++
<i>C. difficile</i>	0 !
<i>Enterobacteriaceae</i>	++++
<i>P. aeruginosa</i>	++++
<i>Acinetobacter</i> spp.	++++
Fungi	+

***If bacteria
and resistance genes
do not have any borders
why we should have ?***

We need standardized methodology to detect problems and their causes, to develop action plan, and to monitor the impact of our work on the international level



At the moment WHO seems to be the organization that can lead this initiative globally