

World Alliance Against Antibiotic Resistance

Alliance Contre le développement des Bactéries Multi-Résistantes

The WAAAR declaration against antibiotic resistance

Jean Carlet, on behalf of the members of the WAAAR

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The increase in antibiotic resistant bacteria poses a major healthcare threat. In the face of an almost complete absence of new antimicrobial drugs in development, antibiotic resistance (ABR) has become one of the main public health problems of our time. Antibiotics are a unique class of medications because of their potential societal impact; use of an antibiotic in a single patient can select for ABR that can spread to other people, animals, and the environment, making an antibacterial used in one patient ineffective for many others. Bacterial resistance can evolve rapidly. As bacteria acquire resistance mechanisms, the altered bacterial genetic material coding for resistance mechanisms can be transmitted at times readily between bacteria, broadening the reach and extent of resistance. Treatment failures because of multidrug resistant (MDR) bacteria, once rare, notable, and limited to hospitals, now occur very commonly in hospitals and increasingly in the community as well. It is estimated that at a minimum 25000 patients in Europe and 23000 in the USA die each year from infections caused by resistant bacteria. The cost of antibiotic resistance is tremendous, whether measured as the personal and societal burden of illness, death rates, or healthcare costs.

Although it is a never-ended phenomenon, antibiotic resistance is directly related to the volume of antibiotics used. We are using increasing amounts of antibiotics in health care and agriculture, and discharging these active drugs into the environment. The impact of widespread antibiotic use is enormous, promoting the development and dissemination of antimicrobial resistance.

Safeguarding antibiotics will require a concerted effort by citizens, patients and prescribers. The primary goal of WAAAR is to raise awareness about the urgency and magnitude of the threat and to promote an international dialogue to assist in effective responses. The Alliance, in particular through this declaration, is dedicated to actively promoting antibiotic preservation and to raising awareness among antibiotic prescribers, politicians and policy-makers, patient safety and advocacy groups, the pharmaceutical industry, international health organizations, and the general population. Individual actions, no matter how well intended, are doomed to failure unless there is an international dialogue, a common sense of purpose, and broad consensus on how best to proceed.

We must change how antibiotics are used and adopt proactive strategies, similar to those used to save endangered species. Preservation of the efficacy of antibiotics and to stabilization of antibiotic-susceptible bacterial ecosystems should be global goals.

We urge all of you to participate in this crusade, in your own field of interest. The medical miracle of antibiotic therapy must be protected – this is a global priority and our duty. Please, help us to act NOW, by supporting this declaration, to promote wiser use of antibiotics in animal and human health, and the necessary accompanying political actions to support better education, integrated surveillance for public health action, and research.



World Alliance Against Antibiotic
Resistance

WAAAR advocates for the following 10 actions

1. Promotion of awareness of all the stakeholders - including the general public - of the threat represented by antibiotic resistance

- Strong cooperation among international political, economic and public health organizations, which, all together, must take the lead of this action against antibiotic resistance.

3. Continuous access to antibiotics of assured quality, especially in middle and low income countries

2. Organization, in each country, ideally by Ministries of Health or regulatory bodies, of a financed national plan for the containment of antibiotic resistance, with the participation of all stakeholders, including patient advocacy groups

4. Integrated Surveillance of antibiotic resistance (ABR) and antibiotic use

- Standardized monitoring of antibiotic use and resistance at institution, regional, and country (comprehensive national data instead) level (through a Centers for Diseases Control and Prevention model) to allow comparative statistics (benchmarking), to be updated preferably in real-time and at least every 12 months. This will require adequate laboratory capacity using international standardized methods that may be facilitated by a centralized technologic coordinating infrastructure and information technology

5. Use of diagnostic tests

- Appropriate use of existing diagnostic tests and development and implementation of new rapid, cost-effective and accurate diagnostic tests, adapted to the local context, to aid in distinguishing bacterial and nonbacterial etiologies. Rapid diagnostics may help clinicians avoid unnecessary treatments, rapidly select appropriate targeted therapies and inform the duration of treatment

6. Antibiotic stewardship (prudent, controlled and monitored approaches to the use of antibiotics)

- In humans (hospitals, long term care facilities and primary care).
- In animals (animal husbandry, agriculture, aquaculture and animal health /veterinary setting), in a "one health" philosophy.
- Progressive elimination of the "over the counter" (i.e. available without a prescription) access to antibiotics (systemic and topicals) for humans or animals.
- Ban of the use of antibiotics as growth promotion in food animals, and exceptional use in prophylaxis.
- Rational use of metaphylaxis (Prophylaxis when some animals in the livestock are sick, or at high risk to be sick), and of animal treatment.
- Limitation of the use of critically important antibiotics in humans and animals (e.g., carbapenems)

7. Educational efforts for change

- Educational programs directed at children/teenagers on antibiotics, bacterial resistance, and infection control (e-Bug model)
- Development of large coordinated, effective information and awareness campaigns directed at the public on expectations about the rational/appropriate use of antibiotics.
- Continuous education and training programs in the curriculum for all health care professionals in all settings (veterinarians, medical, dental, nursing, pharmacy and allied health care schools) and continuing professional education programs, on the rational use of antibiotics, including indications, dosing and duration of therapy. Education of farmers

8. Containment of bacterial transmission and prevention of infection

- Promotion of universal hand hygiene and all infection control interventions that have been proven to reduce rates of resistance
- Relentless efforts to prevent transmission of MDR organisms in healthcare, food production and animal husbandry
- Programs to limit the contamination of drinking water with MDR bacteria, as well as contamination of the environment
- Promotion of the use of available vaccines, in humans and animals

9. Basic and applied research, and development of new antibiotics

- Increased support for basic and applied research aiming at curbing bacterial resistance in human and veterinary medicine.
- Use of the principles of orphan drugs for new antibiotics
- Incentives to stimulate research of new drugs (antibiotics and novel compounds) and vaccines via regulatory pathways that allow for fast track development.
- New economic business models to support the cost of innovation while safeguarding public health interests.

10. Request for UNESCO to include the "concept of antibiotic" in the list of the intangible cultural heritage.

WAAAR is a group of 700 individuals from 55 different countries representing all the key stakeholders (physicians, veterinarians, microbiologists, surgeons, pharmacists, nurses, evolutionary biologists, ecologists, environmentalists, patient advocacy groups). The Alliance receives support from more than 140 learned societies or professional groups throughout the world. WAAAR is a nonprofit organization open to professionals and consumers worldwide. WAAAR receives no funding from the pharmaceutical industry

Supporting Individuals

Laurent Aaron (France), Mohamed Salah Abassi (Tunisia), Lilian Abbo (USA), Oladipo Aboderin (Nigeria), Edward Abraham (USA), Fekri Abroug (Tunisia), Jacques Acar (France), Wafa Achour (Tunisia), Javier Adachi (USA), Seif Al-Abri (Oman), Haifaa Al-Mousa (Kuwait), Antonio Albaya-Moreno (Spain), Corinne Alberti (France), Serge Alfandari (France), Amani Alnimr (Saudi Arabia), Celia Alpuche Aranda (Mexico), Francisco Alvarez de Lerma (Spain), Fatma Amer (Egypt), Antoine Andremont (France), François Angoulvant (France), Maryvonne Anguill (France), Massimo Antonelli (Italy), Eleni Antoniadou (Greece), Guillaume Arlet (France), Apostolos Armaganidis (Greece), Anne Arnera (France), Antonio Artigas (Spain), Claude Attali (France), Frédéric Auber (France), Jean-Pierre Aubert (France), Bernard Augereau (France), Martine Aupée (France), Olfa Bahri (Tunisia), Françoise Ballereau (France), Gérard Bapt (France), Fernando Baquero (Spain), Timothy Barkhan (Singapore), Ouahid Barouti (Morocco), Marie-Anne Barthelemy (France), Greg Barton (UK), Davide Bastoni (Italy), Michel Baussier (France), Luis Bavestrello (Chile), Birgit Beger (Belgium), Samuel Benenson (Israel), Fethi Bensalem (France), Guillaume Béraud (France), Frederique Bergeau (France), Gordon Bernard (USA), Philippe Berthelot (France), Xavier Bertrand (France), Frédérique Beuhorry-Sassus (France), Pascal Beuret (France), John Billington (USA), Jacques Birgé (France), Sandra Biscardi (France), Luis Blanch (Spain), Hervé Blanchard (France), Thomas Bleck (USA), Joseph Blondeau (Canada), François Blot (France), France Borgey (France), Alain Bousquet-Mélou (France), Jean Brami (France), Christophe Brard (France), Stéphane Bretagne (France), Cédric Bretonnière (France), Adrian Brink (South Africa), Sheldon Brown (USA), Catherine Bruant-Rodier (France), Christian Brun-Buisson (France), Fabrice Bruneel (France), Frederico Bruzzi de Carvalho (Brazil), Christophe Buhot (France), Huda Bukharie (Saudi Arabia), André Cabié (France), Thierry Calandra (Switzerland), Isabelle Caniaux (France), Manuela Caniça (Portugal), Rafael Canton (Spain), Philippe Careno (France), Camille Carlet (France), Claude Carlet (France), Florian Carlet (France), Jean Carlet (France), Romain Carlet (France), Otto Cars (Sweden), Manuel Cassiano-Neves (Portugal), Bernard Castan (France), Vincent Castellan (France), France Cazenave-Roblot (France), Alain-Michel Ceretti (France), Jean-Charles Chakarian (France), Ludivine Chalumeau-Lemoine (France), John Chandy (USA), Bernard Chanfreau (France), Jean Chastre (France), Robert Chausset (France), Pascal Chavanet (France), William Cheadle (USA), Jean-Daniel Chiche (France), Christian Chidiac (France), Olivier Chosidow (France), Natalia Chueca (Spain), Jon Cohen (UK), Robert Cohen (France), Peter Collignon (Australia), Frédéric Collot (France), Patrick Coloby (France), John Conly (Canada), Cruz Cordero (Brazil), Catherine Cordonnier (France), Alejandra Corso (Argentina), Sara Cosgrove (USA), René Courcol (France), Steve Crane (USA), Donald Craven (USA), Adnida Crespin (France), Marces Cyrillo (Brazil), Pierre-Eric Danin (France), Jan De Waele (Belgium), Pierre Dellamonica (France), E. Patchen Dellinger (USA), Philip Dellinger (USA), Jean Delmont (France), Eric Denes (France), George Dimopoulos (Greece), Dimitri Drekonja (USA), Anahi Dreser Mansilla (Mexico), Pierre-Louis Druais (France), Sylvie Dufour-Pierrat (France), Catherine Dumartin (France), Martin Dünser (Austria), Michel Dupont (France), Ricardo Durlach (Argentina), Oliver Dyar (UK), Gabriela Echaniz (Mexico), Paul Edelstein (USA), Philippe Eggimann (Switzerland), Mohamed Elghonemi (Egypt), Naima Elmdaghri (Morocco), Rehab Elsaid (Egypt), Rehab Elskari (Egypt), Dan Engelhard (Israel), Jacques Fabry (France), Christopher Farmer (USA), J. Fernandez (Spain), Simon Finfer (Australia), Patricia Finn (USA), Katrin Fjeldsted (Israel), Daniel Floret (France), Francesco Flozaro (Spain), Jacinthe Foegle (France), Xavier Forceville (France), Sandra Fournier (France), Irène Frachon (France), Alexander Friedrich (The Netherlands), Pascal Funuel (France), Didier Gaillard (France), Jacques Gaillat (France), Tatiana Galperine (France), Karine Gambarotto (France), Bernard Garo (France), Maité Garrouste-Orgeas (France), Petra Gastemeier (Germany), Jean-Yves Gauchot (France), Remy Gauzit (France), Gaëtan Gavazzi (France), Louise Gazagne (France), Julie Gerberding (USA), Abdul Ghafur (India), Evangelos Giamarellos-Bourboulis (Greece), Eleni Giamarellou (Greece), Marine Giard (France), Mark Gilchrist (UK), Jacques Gilquin (France), Fernando Gilsanz (Spain), Marek Gniadkowski (Poland), Charalambos Gogos (Greece), Don Goldman (USA), Florence Gordon (France), Thomas Gottlieb (Australia), Ian Gould (UK), Joao Gouveia (Portugal), Jennifer Grant (Canada), Lindsay Grason (Australia), Alix Greder (France), Hajo Grundman (The Netherlands), Eric Guaguere (France), Gwenaelle Guéroult-Locher (France), Benoit Guery (France), Bertrand Guidet (France), Catherine Guignabert (France), Pradip Gupta (India), Sanjay Gupta (UK), Mohan Gurjar (India), Manuel Guzman (Venezuela), Joseph Hajjar (France), Noha Hammad (Egypt), Anette Hammerum (Denmark), Hakan Hanberger (Sweden), Regina Hanke (Germany), Stephan Harbarth (Switzerland), Anita Harel (France), Elisabeth Heisbourg (Austria), Isabelle Hermes (France), Jean-Pierre Hermet (France), Bernard Hirschel (Switzerland), Bruno Hoen (France), Aidan Hollis (Canada), Xiao Honghong (China), David Hooper (USA), Juan Pablo Horcajada (Spain), Bruno Housset (France), Waleria Hryniewicz (Poland), Li Yang Hsu (Singapore), Susan Huang (USA), James Hughes (USA), Jean-Louis Hunault (France), Lotte Jakobsen (Denmark), Nordiah Jalil (Malaysia), Hilde Jansens (Belgium), Vincent Jarlier (France), William Jarvis (USA), Dominique Jean (France), Matjaz Jereb (Slovenia), James Johnson (USA), Marie-Laure Joly-Guillou (France), Olivier Jonquet (France), Guillaume Kac (France), Deogracias Kaddu-Mulindwa (Uganda), Mitsuo Kaku (Japan), Badreddine Kilani (Tunisia), Eui-Chong Kim (South Korea), Dorothée Kinde Gazard (Benin), Keith Klugman (USA), Stacey Klutts (USA), Jan Kluytmans (The Netherlands), Marin Kolf (USA), Despoina Koulenti (Greece), Michael Kresken (Germany), François Lacoïn (France), Jean-Patrick Lajonchère (France), Nathalie Landgraf (France), Gérard Larroussin (France), Pierre-François Laterre (Belgium), Anne-Marie Lavenaire (France), Thierry Lavigne (France), Ramanan Laxminarayan (USA), Thi Anh Thu Le (Vietnam), Françoise Leblanc-Jouffre (France), Nam Yong Lee (South Korea), Olivier Lehiani (France), Hervé Lelouet (France), Frédérique Lemanach-Kergueris (France), Alain Lepape (France), Joel Leroy (France), Xavier Lescurie (France), Mitchell Levy (USA), Gabriel Levy-Hara (Argentina), Ling Moi Lin (Singapore), Jeffrey Lipman (Australia), Joel Livartowski (France), David Looke (Australia), Fernando Luis Lopez Cardozo (Brazil), Francisco Lopez Medrano (Spain), Anne Lotthé (France), Jean Christophe Lucet (France), David Lupande (D. R. Congo), Jean-Yves Madec (France), Jean-Luc Mainardi (France), Sundareshan Maiyilagan (Mauritius), Jordi Mancebo (Spain), Franck Mansour-Adeoti (France), Enrique Maravi (Spain), Bruno Marchou (France), Darcy Marciniuk (Canada), John Marshall (Canada), Claude Martin (France), David Martin (USA), Luis Martinez-Martinez (Spain), Alain Martinot (France), Emilio Maseda (Spain), Dimitrios Matamis (Greece), Sophie Matheron (France), Ricardo Matos (Portugal), Marie Matthews (UK), Thierry May (France), Thierry Mayet (France), John McGowan (USA), Shaheen Mehtar (South Africa), Jose Mario Meira Teles (Brazil), Marc Mendelson (South Africa), Christian Michelet (France), Albert Mifsud (UK), Magolia Mikaszewska-Sokolewicz (Poland), Jessica Minion (Canada), Christelle Miquel (France), Jean-Paul Mira (France), Jose Miro (Spain), Benoit Misset (France), Jean-Jacques Monot (France), Philippe Montravers (France), Joy Mootien (France), Rui Moreno (Portugal), Andrew Morris (USA), Gérard Moulin (France), Cécile Mourlan (France), Gilbert Mouthon (France), Wafaa Mowafy (Egypt), Elke Muhl (Germany), A. Muruganathan (India), Enani Mushira (Saudi Arabia), Babacar N'Doye (Senegal), Aburjania Nana (USA), Michael Niederman (USA), Gérard Nitenberg (France), Patrice Nordman (France), Assumpta Novira (Spain), Cyrille Nowak (France), Iruka Okeke (USA), Pedro Maria Olaechea (Spain), Abeer Omar (Kuwait), Steve Opal (USA), Carlos Ortiz Leyba (Spain), Bauke Oudega (The Netherlands), Eric Oziol (France), Bernard Page (France), Jose Arthur Paiva (Portugal), Lucy Palmer (USA), Mercedes Palomar-Martinez (Spain), Pierre Parneix (France), Didier Payen de la Garanderie (France), Eli Perencevich (USA), Trish Perl (USA), Christian Perronne (France), Georg Peters (Germany), Matthew Peters (Australia), Dominique Peyramond (France), François Philippart (France), Didier Pittet (Switzerland), Jean-François Pittet (USA), Patrick Plésiat (France), Mathias Pletz (Germany), Marie-Cécile Ploy (France), Florence Pospisil (France), Pascal Pouedras (France), Garyphallia Poulakou (Greece), Anny Poursinoff (France), Peter Pronovost (USA), Céline Pulcini (France), Massimo Puoti (Italy), Shanmugan Puvanendiram (Sri Lanka), Michael Quintel (Germany), Christian Rabaud (France), Claude Rambaud (France), Helena Ramos (Portugal), Ossama Rassla (Egypt), Josette Raymond (France), Bernard Regnier (France), Konrad Reinhart (Germany), Jordi Rello Condomines (Spain), Jean-Claude Revil (Reveil?), (France), Agnès Riché (France), Paul Richman (USA), Rosana Richmann (Brasil), Viviana Rodriguez (Argentina), Jesus Rodriguez-Bano (Spain), Olivier Romain (France), Karine Romand (France), Elisabeth Rossines (France), Monique Rothan-Tondeur (France), Jean-François Rousselet (France), Ethan Rubinstein (Canada), Vladimir Rudnov (Russia), Narender Saini (India), Dominique Salmon (France), Reinaldo Salomao (Brazil), Miguel Sanchez Garcia (Spain), Antonio Santos-Bouza (Spain), Marie-Caude Saux (France), Anne Savy (France), Lynora Saxinger (Canada), Benoit Schlemmer (France), Jean-Luc Schmit (France), Dietmar Schneider (Germany), Janet Schoemaker (USA), Sanjeev Singh (India), Jordi Sole-Violan (Spain), Sara Soto (France), Jean-Paul Stahl (France), Annabelle Stoclin (France), Alexis Tabah (Australia), Jean-Philippe Tabut (France), Paul Anamtharajah Tambyah (Singapore), Fabienne Tamion (France), Phillip Tarr (USA), Pierre Tattevin (France), Fred Tenover (USA), Nicolas Terzi (France), Marthe Than Lecompte (Switzerland), Jonathan Theodore (France), Didier Thevenin (France), Philippe Thevenot (France), Laurent Thiriet (France), Carol Thompson (USA), Joseph Thurn (USA), Glenn Tillotson (USA), Hanene Tiouiri (Tunisia), Antonio Torres (Spain), François Trémolières (France), Michel Troadec (France), Rabiātu Umar (Nigeria), Garance Upham (France), Carl Urban (USA), Jan Vaarten (-), Dominique Valla (France), Nathalie Van Der Mee-Marquet (France), Jos Van der Meer (The Netherlands), Tom Van Der Poll (The Netherlands), Jacques Vancel (France), Philippe Vanhems (France), Remi Varin (France), Emmanuelle Varon (France), David Vaughan (USA), Marc Veilly (France), K. Vijayakumar (India), Alvaro Villanueva (Columbia), Jean-Louis Vincent (Belgium), Virginie Vitrat (France), Andreas Voss (The Netherlands), Robert Wachter (USA), Tim Walsh (UK), Peter Wark (Australia), Grant Waterer (Australia), Henrik Caspar Wegener (Denmark), Pierre Weinbreck (France), Robert Weinstein (USA), Scott Weissman (USA), Jeanine Wiener-Kronish (USA), Alexander Wilmer (Belgium), Benjamin Wyplosz (France), Ibrahim Yacoub-Agha (France), Melanie Young (USA), Ibrahim Yusuf (Nigeria), Emile Zein (Lebanon), George Zhanell (Canada), Stephen Zinner (USA), Joséphine Zoungrana (Burkina Faso), Nadezhda Zubareva (Russia).

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Vijayakumar), Infection Control Association of Singapore (ICAS) (Ling Moi Lin), Instituto Latino-Americano de Sepsis (ILAS) (Reinaldo Salomao), International Society of Chemotherapy (Ian Gould), International Society of Infectious Diseases (ISID) (Jon Cohen, Keith Klugman), Israel Society for Infectious Diseases, Italian Society of Anesthesiology, Korean Society of Clinical Microbiology (Nam Yong Lee), Lebanese Association for Medical Diagnosis and Auto-Immune Diseases (Lambda) (Georges Khalil), Pan American Society of Infectious Diseases (Luis Bavestrello), Paul-Ehrlich-Gesellschaft für Chemotherapie e.V. 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