OUTPATIENT ANTIBIOTIC CONSUMPTION AT VILA CENTRAL HOSPITAL: JANUARY 2018 TO DECEMBER 2021

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INTRODUCTION

- In 2015 WHO declared Antimicrobial Resistance (including antibiotic resistance) a Global Threat to Public Health and Development
- World Health Assembly members asked to implement National Action Plan (NAP) to contain Antimicrobial Resistance
- NAP Objective 4: optimise the use of antimicrobials through Antimicrobial Stewardship Programmes (ASPs)
- Monitoring and analysing antibiotic consumption is a key element of an Antimicrobial Stewardship Programme.

Research Objective:

 To examine outpatient antibiotic consumption and AWaRe prescribing at Vila Central Hospital (VCH) January 2018 to December 2021

METHODS

Terminology:

- ASPs [Antibiotic Stewardship Programs]
- EML [Essential Medicines List]
- WHO's ATC/DDD classification [Anatomical Therapeutic Chemical/Defined Daily Dose classification]
- DIDs [Defined daily dose per 1000 inhabitants per day]
- AWaRe Classification [Access, Watch and Restrict antibiotics]



METHODS

- Antibiotics included in this study are listed on the Vanuatu EML
- Dispensed from VCH Pharmacy window to outpatients;
- Monthly quantities of each antibiotic prescribed between Jan. 2018 and Dec. 2021 obtained from VCH's M-Supply database (Pharmacy database);
- WHO's ATC/DDD Index interrogated to obtain ATC code and DDD unit of measurement for each antibiotic;
 - Only antibiotics classified into ATC code J01 indicating antibacterials for systemic use were included.
 - Outpatient consumption reported as DIDs (DDDs per 1000 inhabitants per day)

METHODS

We calculated monthly: I). DDDs and 2). DIDs in the following ways:

I). Total DDDs per antibiotic per month =

<u>Total quantity consumed per month (gms)</u>

DDD unit (gms)

2). Total DIDs per antibiotic per month =

<u>Total monthly DDDs X 1000</u>

VCH's annual catchment population X 30

(average number of days per month)

- T-tests were use to compare differences in mean monthly consumption
- A p-value of ≤0.05 was considered statistically significant
- Statistical analysis was conducted using Stata version 15 (Stata Corp.)



RESULT

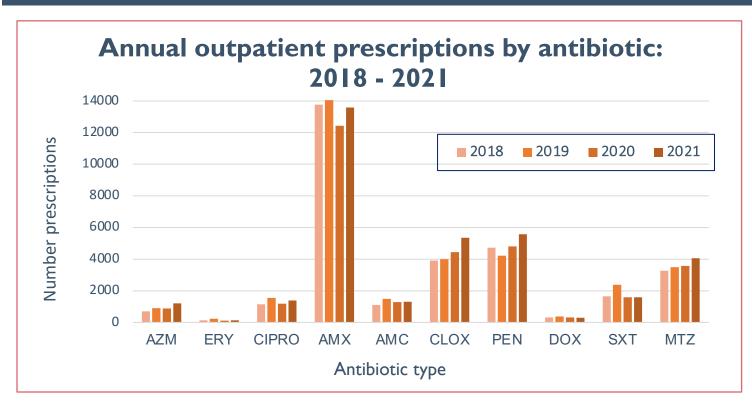
10 Antibiotics consumed by outpatients included in the Study

Table includes

- Antibiotic class
- ATC code
- Route of administration
- DDD unit of measurement
- AWaRe class

Antibiotic	Class	ATC code	Route	DDD units (grams)	AWaRe Class
Amoxicillin	Penicillins	J01CA04	oral	1.5	Access
Amoxicillin clavulanate	Beta-lactam/beta-	J01CR02	oral	0.625	Access
	lactamase inhibitor				
Azithromycin	Macrolides	J01FA10	oral	0.3	Watch
Ciprofloxacin	Fluoroquinolones	J01MA02	oral		Watch
Cloxacillin	Penicillins	J01CF02	oral	2	Access
Doxycycline	Tetracyclines	J01AA02	oral	0.1	Access
Erythromycin	Macrolides	J01FA01	oral	1	Watch
Metronidazole	lmidazole	J01XD01	oral	1.5	Access
Phenoxymethylpenicillin	Penicillins	J01CE02	oral	2	Access
Sulfamethoxazole	SXT Combinations	J01EE01	oral	4	Access
Trimethoprim					

RESULTS



Annual Outpatient Prescriptions				
	2018	2019	2020	2021
Total				
prescriptions	30,719	32,671	30,621	34,475
0/ D	770/	720/	750/	750/
% Penicillins	77%	73%	/5%	75%

AZM = azithromycin, ERY = erythromycin, CIP = ciprofloxacin; AMOX = amoxicillin, AUG = augmentin, CLOXA = cloxacillin, PEN = penicillin, DOX = doxycycline, SXT = cotrimoxazole, MNZ = metronidazole.



RESULTS

Antibiotic Consumption	2018	2019	2020	2021
Total DDDs	147,224	152,014	143,442	166,831
Total DIDs	48.42	49.07	45.39	51.81
Mean monthly DIDs	4.02	4.09	3.78	4.32

DDD = defined daily dose
DID = DDDs per 1000 inhabitants per day
(based on VCH's annual catchment population = Shefa)

Difference in mean monthly DIDs

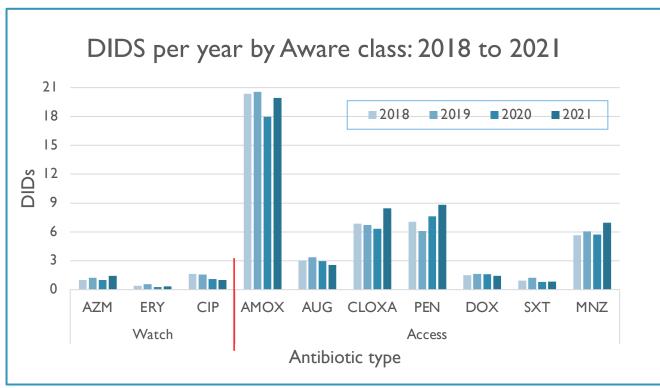
2018 and 2019 – no statistical difference

2019 and 2020 – no statistical difference

2020 and 2021 = 0.55 p value 0.0065 (95% CI 0.9; 0.16)

There was a statistically significant increase in outpatient consumption between 2020 and 2021

RESULTS



Antibiotic type					
Watch: AZM = azithromycin, ERY = erythromycin, CIP = ciprofloxacin; Access: AMOX = amoxicillin, AUG = augmentin, CLOXA = cloxacillin, PEN = penicillin, DOX =					
doxycycline, SXT = cotrimoxazole, MNZ = metronidazole; *DDD = defined daily dose.					

	DIDs (% total consumption)					
Aware Class	2018	2019	2020	2021		
Watch	3.06 (6)	3.38 (6)	2.37 (4)	2.76 (5)		
Access	45.36 (94)	45.69 (94)	43.07 (96)	49.05 (95)		



DISCUSSION

- Possibly first study about antibiotic consumption conducted in Vanuatu
- Steady consumption between 2018 and 2020 with a significant increase between 2020 and 2021
- One study found for PICTs Samoa in 2007 but cannot compare results as data sources and analysis differ and study almost 20 years old
- Study limited to VCH therefore, cannot generalize results to other health settings in Vanuatu

RECOMMENDATIONS

Need to:

- Build a picture of antibiotic consumption in Vanuatu across all health settings:
 - MoH Referral hospitals, Provincial hospitals, Health Centres; Village Aid posts
 - Private Practice Private hospitals, GP and Dental clinics, Pharmacies
- Complement outpatient consumption with Point Prevalence Surveys about antibiotic prescribing in inpatient settings
- Share results at all levels

RECOMMENDATIONS

Why is it Necessary to:

 Regularly monitor and analyse antibiotic consumption across health settings in Vanuatu

Antibiotic consumption an important element in AS programs

- Results can be used to:
 - Track dispensing using local data and set national targets for improvement
 - Assess effectiveness of strategies implemented to influence prescribing e.g. adherence to treatment guidelines
 - Make comparisons with health settings in Vanuatu, PICTs, Internationally
 - Inform antibiotic policies

ACKNOWLEDGEMENTS

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And

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Reference:

Hollingworth S. & Kairuz T. Measuring Medicine Use: Applying ATC/DDD Methodology to Real-World Data. *Pharmacy (Basel)* **9**, doi:10.3390/pharmacy9010060 (2021).

