SYMPOSIUM

SYMPOSIUM 1 (SP 1)

IMPLEMENTATION OF THE COMPREHENSIVE PROGRAM TO ELIMINATE HEALTHCARE-ASSOCIATED INFECTIONS AND ANTIMICROBIAL RESISTANCE

SP 1-1

NATIONAL RESPONSE AND ACTION: PERSPECTIVE AND CHALLENGES OF ANTIMICROBIAL STEWARDSHIP IN TAIWAN

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Resistant microorganisms continue to emerge and spread. Multi-drug-resistant organisms (MDROs) are increasingly recognized as a global and local health threat. World Health Organization (WHO) announced that antimicrobial resistance is one of three major challenges in patient safety. Moreover, WHO classified "Combat antimicrobial resistance" as the theme for World Health Day in 2011 and appealed globally that "no action today, no cure tomorrow." In response to the emergence of antimicrobial resistance in pathogens encountered in hospitals and more recently in the community. Centers for Disease Control, Taiwan (Taiwan CDC) has been started to implement national action plan to combat antimicrobial resistance –Antimicrobial Stewardship Program from 2013 to 2015 for counter-measuring the emergence of MDROs and healthcare- associated infections (HCAI). The national action plan on antimicrobial stewardship is a multifaceted, multidisciplinary approach through the coordination and supervision, the regular review and allocation of resources, and the measurement of the performance and benchmark by Taiwan CDC, Taiwan Joint Commission on Hospital Accreditation (T.JCHA), the Infection Control Society of Taiwan, the Infectious Diseases Society of Taiwan and the participated hospitals. The national action plan-antimicrobial stewardship program has been implemented from May 2013. The preliminary results revealed the rate of antimicrobial resistance declined 6.6%, the total hospital antibiotic usage rates declined 2.3% and the rate of HCAI declined 12.0%. Reduction of antimicrobial resistance and HCAI can be achieved through effective implementation of antimicrobial stewardship program.

SP 1-2

ACTION PLAN TO PREVENT HEALTHCARE-ASSOCIATED INFECTIONS AND ANTIMICROBIAL RESISTANCE IN SINGAPORE

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In Singapore, prevalent multiresistant bacteria include methicillin-resistant Staphylococcus aureus (MRSA), extended-spectrum betalactamase Escherichia coli and Klebsiella pneumoniae, and extensively drug-resistant Acinetobacter baumannii. These were associated with increased mortality, prolonged hospitalisation and cost of care. Since 2010 there have been outbreaks of carbapenemase-producing Enterobacteriaceae including New Delhi metallo-betalactamase, K pneumoniae carbapenemase and oxacillinase. Infection control programmes are mandatory in all hospitals. Active MRSA surveillance is well implemented in Singapore General, National University and Tan Tock Seng Hospitals, and has shown reduction in MRSA acquisition and/or bacteraemia. Hand hygiene programmes are emphasised, with bi-monthly audits using World Health Organisation Five Moments. Antimicrobial stewardship programmes are funded for all public hospitals. At Tan Tock Seng Hospital, as part of a Hospital Acquired Infection Elimination Collaborative, multidisciplinary ward teams comprising medical, nursing and allied health members are empowered to develop innovation approaches to enhance hand hygiene. Additionally multidisciplinary expert panels developed prevention bundles for hospital-acquired pneumonia, catheter-associated urinary tract infections, central line associated bloodstream infections, and surgical site infections. Much work still needs to be undertaken to prevent and contain antimicrobial resistance and healthcare-associated infections. Fortunately there is strong commitment and support from Ministry of Health and hospital senior management.

SP 1-3

ACTION PLAN TO PREVENT HEALTHCARE-ASSOCIATED INFECTIONS AND ANTIMICROBIAL RESISTANCE IN HONG KONG

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The Centre for Health Protection (CHP) was set up in Hong Kong in 2004 as one of the recommendations of the Expert Panel on SARS. Infection Control Branch is among the six branches under the Centre. Its major roles are to develop, promulgate and evaluate best practices in infection control at health care and non-health care settings; and to coordinate, facilitate and support training in infection control for all levels of health care staff and personnel in health care settings. The Branch is staffed by a multidisciplinary team comprising of specialists in public health, clinical infectious disease and microbiology, infection control nurses, occupational hygiene etc. The Branch acts as a bridge between the public and private healthcare sectors and public health for promotion of infection control practices.

Over the previous 10 years, numerous programs on prevention and control of healthcare associated infections (HAIs) and antimicrobial resistance have been rolled out and coordinated by CHP. The lectures will highlight selected programs and their implementation and impact on healthcare quality.

Framework of the presentation:
A. Review of infection control infrastructure in Hong Kong
B. Healthcare associated infections (HAIs)
   1. Periodic prevalence surveys of HAIs in public hospitals
   2. Surgical site infection program
   3. Catheter associated blood stream infection program
   4. Nosocomial outbreak reporting and control mechanisms
   5. Other HAIs
C. Antimicrobial Resistance (AMR)
   1. Health Protection Program on Antimicrobial Resistance
   2. Surveillance:
      - Use of MRSA bacteraemia as a key performance indicator in public hospital
      - CA-MRSA as a statutorily notifiable disease
      - Trend of Multidrug Resistant Organisms in Hong Kong
   3. Antibiotic Stewardship Program
   4. Infection control programs including hand hygiene and environmental hygiene
   5. Community engagement in combat of AMR