



INDIA

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The Global PPS is a unique and innovative method of learning about antibiotic practices across the world. Initially it had started as an EU initiative but in the second phase it involved many countries including India, and we were keen to participate. Initially we contributed our data to the ARPEC study which was essentially on the paediatric population. However the results were fascinating and Ann shared the Indian data which we could compile and also publish.

The proforma is not complicated and we were able to train our infection control nurses (ICN) to collect the data. We conducted several mock rounds of data collection before the actual PPS. This helped us to resolve queries which kept popping up. Ann had been very helpful in sorting out all queries which rose from time to time. The data was collected on paper format initially and then uploaded on the Redcap software. This we found more convenient, than direct uploading, errors were less.

India is a country without strict regulatory mechanisms to monitor appropriate use of antibiotics, and over-the-counter availability makes situation even more difficult. The burden of inappropriate use in the human health sector is not yet measured. Besides a few government initiatives, only involving government institutions does not reveal the real-time scenario, as 80% of India's healthcare lies in the private sector. The Global-PPS does not discriminate public and private healthcare systems and are willing to include any institution which is willing to participate, this effort might help to estimate the closest approximate burden as of now. With so much of effort being given to combat antimicrobial resistance (AMR), this data might help in bringing in the much required awareness among policy makers, especially as India ranks high in contribution to the global burden of AMR.