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Globalization of antibiotic resistance: Local action required

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There was much furor over reporting of NDM-1 enzyme in one of the leading medical journals. The extensive media coverage brought home the reality of globalization of antibiotic resistance with no political borders. Antibiotics are also important in management of organ transplant and cancer patients. List of effective /working antibiotics is shrinking with no major breakthrough discoveries in near future. The challenge posed by MRSA, highly drug resistant/pan drug resistant *Acinetobacter*, ESBL, AmpC and metallo beta lactamase producing *Enterobacteriaceae* is alarming and no longer restricted to any geographic area. Prescription of antibacterial drugs for viral infections, inadequate dosage, rampant use of broad-spectrum antibiotics, and availability of over-the-counter antibiotics in many developing countries is a reality. Moreover overcrowded conditions of public hospitals in resource limited settings of Asia and Africa, lack of trained manpower, poor compliance to infection control measures lead to health care settings teeming with multidrug resistant bugs.

In order to save existing effective antibiotics drastic measures may be required. In many developed countries like France, UK and USA legal framework have been drawn /in process to implement antibiotic stewardship in hospitals, mandatory disclosure of the same to public, to mention death due to HAI on death certificate and make HAI rates public. We in India and other developing countries also need such laws so that it is mandatory for hospitals to take necessary steps towards prevention of nosocomial infections. Law regarding infectious waste management has been a success. We also need to inculcate a culture of accountability, administrative support and political motivation. Prescriber education, formulary restriction, preauthorization and surveillance strategies are essential. We also need more funds. Global guidelines help but it is the local innovations that may come handier.

Biography

Dr. Neelam Taneja did her MD from Lady Hardinge Medical College, Delhi, India at the age of 30 years and has been working as a faculty (Associate professor) in the Department of Medical Microbiology at Postgraduate Institute of Medical Sciences and Research, Chandigarh, a premier Institute in India since 1999. Her research areas include surveillance, molecular epidemiology, molecular mechanisms of Antimicrobial resistance, Hospital acquired infections and bacterial diarrhoeagenic pathogens. She has 60 publications in reputed peer reviewed journals. She received International young woman scientist development award from ISID and is fellow of International Medical science Academy of India.