



Parallel session 2: Research and Development

**Rapporteur: Suzanne Eckford,
Veterinary Medicines Directorate, UK**



- ❖ **Prevention is better than cure** – we need to get the basics right
- ❖ **Better, and faster, point of care diagnostic tools** are required, together with new prevention treatment and control (IPC) methods, including **vaccines, alternatives**, and processes and practices that overcome the human factor
- ❖ We must continue to drive towards the **sustainable discovery and development of new antibiotics**, strengthened by public–private partnerships (PPPs)
- ❖ However - not a single new class of antibiotics broadly effective against gram-negative bacteria has reached the market in over 50 years; **high risk this situation will continue**
- ❖ So reconsider whether the **allocation of resources** between drug development and transmission control and antibiotic stewardship **has the right balance**





- ❖ Need **renewed focus on the environment** - significant reservoir of resistance genes , in particular address **antimicrobial pollution sources** and **reduce the environmental transmission route for pathogens**, including through management of faecal waste.
- ❖ Make **Improved Sanitation** a priority on the AMR agenda
- ❖ Focus on **New Methods** to produce data, e.g. sampling approaches/ targets, role of metagenomics
- ❖ Prioritise **Social Science** - considering the need for varied approaches that suit different country contexts. **How can we facilitate and accelerate behaviour change?**
- ❖ Need commitment to policy implementation – focus on **Translational Research** to show where and how to focus policy interventions and **awareness campaign**
- ❖ Remember that **One-sided Action** pays off - a **driver for every country to act**





Call to Action

1. Encourage **private funding/ public private partnerships** and develop sustainable **national financial and non-financial market incentives** (such as fast-track approvals for new AM products and diagnostics) and **global co-ordination mechanisms** for R&D to address sectoral and cross-sectoral AMR.
2. Enhance investment into developing, prioritising and implementing context specific IPC approaches, and into building the economic case – **define the price tag of inaction** and **articulate the cost:benefit of implementing differing IPC methods**
3. Funders and researchers should **employ impact assessments with clear indicators and targets** to aid in policy and investment decisions
4. Governments and philanthropic organizations to support research activities that focus on the identified areas/questions of the **One Health AMR priority research agenda**, and **embed research components** into AMR National Action Plans
5. Enhance **International research collaborations** and **Communicate** the outcomes of research more effectively across the international community





....and finally

we encourage all to apply for membership of the new AMR Multi-Stakeholder Partnership Platform as addressing the challenge of AMR needs **common coordinated actions**.





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لمقاومة مضادات الميكروبات
Third Global High-Level Ministerial
Conference on Antimicrobial Resistance