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Latvia's Experience on AMR Policy Development

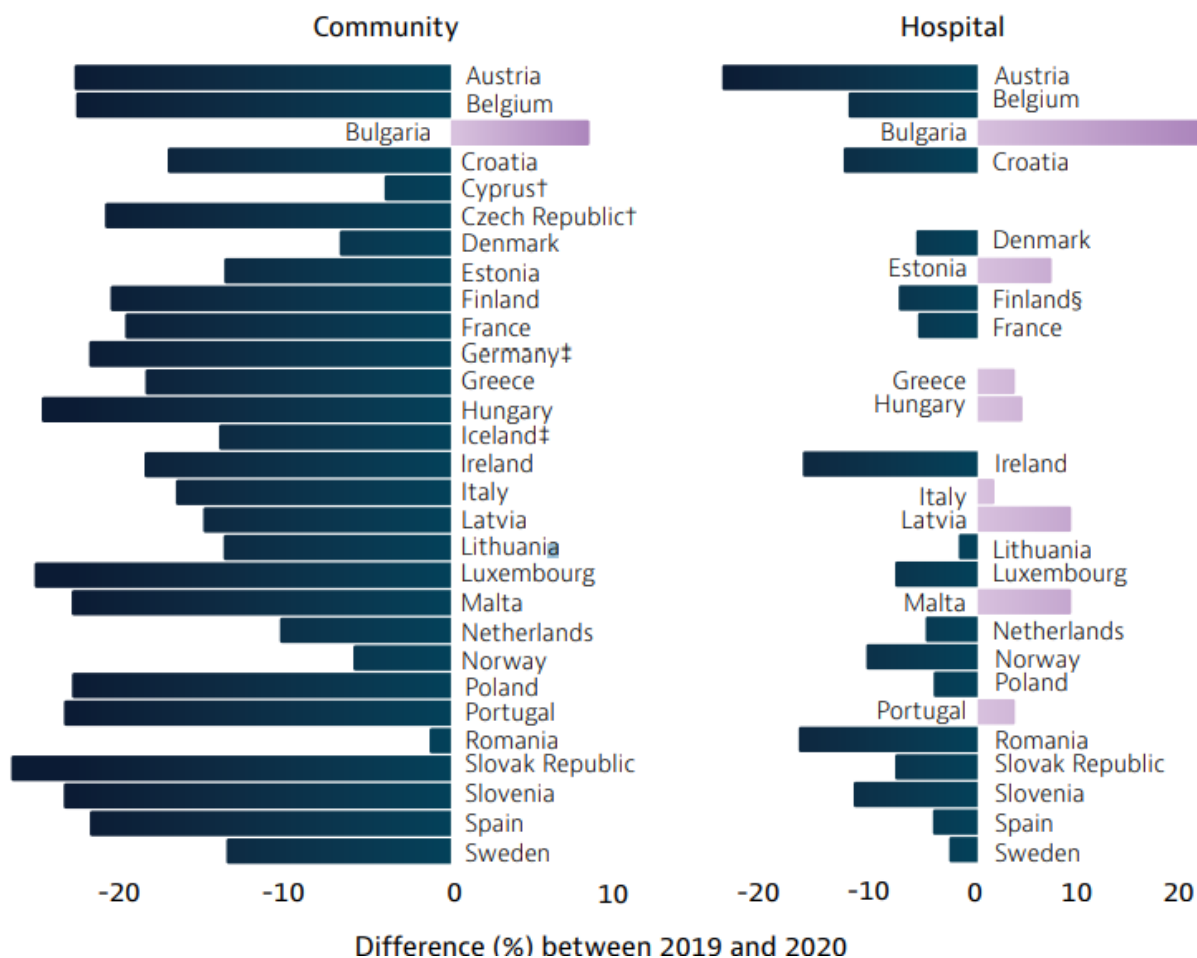
Meeting of the subgroup of the AMR One Health Network on
AMR NAPs 31.05.2022-01.06.2022.

Jana Feldmane, Acting Director, Public Health Department, MoH



Challenge – Increased Antibiotic Consumption in Hospitals

Differences in national consumption of antibiotics between 2019 and 2020 in the community and the hospital sector (OECD, 2022)





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Challenge – High Proportion of Broad-spectrum Antibiotic Consumption

Total antibiotic consumption in humans according to the “Access, Watch, Reserve” classification (OECD, 2022)





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Challenge – Low Blood Culture Utilization Rate in Healthcare

Blood cultures per
1000 patient days:

in Latvia - 13.8

in Estonia - 35.8

in Sweden - 105.6

Table A3.2 Population and hospitals contributing data: coverage, representativeness and blood-culture rate, WHO European Region, 2020 (or latest available data)

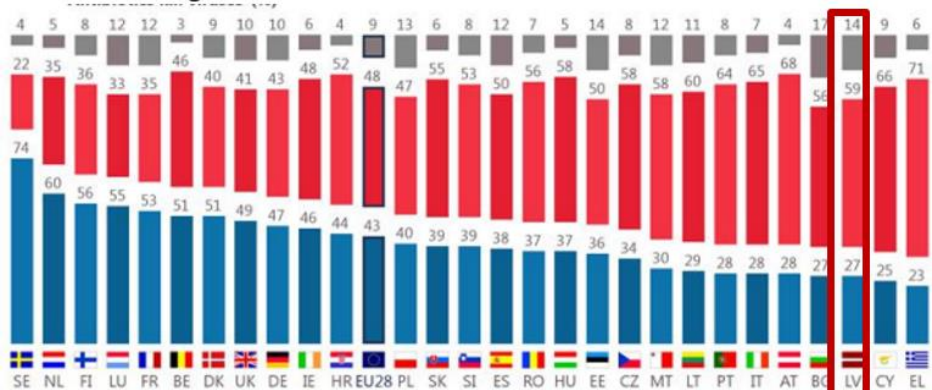
Country/area	Estimated population coverage ^a (%)	Geographical representativeness ^a	Hospital representativeness ^a	Patient and isolate representativeness ^a	Blood-culture rate (blood-culture sets/1 000 patient days) ^b
EU/EEA					
Austria	Unknown	High	High	High	Unknown
Belgium	36 ^c	High	High	High	129.6 ^d
Bulgaria	45	Medium	Medium	Medium	10.4
Croatia	80	High	High	High	109
Cyprus	85	High	High	High	60.9
Czechia	80	High	High	High	19.7
Denmark	100	High	High	High	202.4
Estonia	100	High	High	High	35.8
Finland	96	High	High	High	175.1
France	48 ^c	High	High	High	54.5 ^d
Germany ^e	27	High	Medium	High	37.9
Greece	60	High	High	Medium	Unknown
Hungary	90	High	High	High	17.2
Iceland	100	High	High	High	61.3
Ireland	76	High	High	High	Unknown
Italy	47	High	High	High	57
Latvia	90	High	Medium	Medium	13.8
Liechtenstein	–	–	–	–	–
Lithuania	100	High	High	High	8.1
Luxembourg	99	High	High	High	38.9
Malta	95	High	High	High	35.2
Netherlands	72	High	High	High	Unknown
Norway	94	High	High	High	91.9
Poland	16	Medium	Medium	Medium	45.6
Portugal	97	High	High	High	244.2
Romania	21	Poor	Poor	Poor	26.4
Slovakia	56	High	High	High	27.0
Slovenia	99	High	High	High	47.1
Spain	36	Medium	High	High	109.5
Sweden	78	High	High	High	105.6
Non-EU/EEA					
Belarus	99	High	High	Poor	6 (2–97)
Bosnia and Herzegovina	77	High	High	Medium	9 (4–52)
Georgia	80	High	High	Poor	5 (0–33)
Montenegro	100	High	High	Poor	3 (0–25)
North Macedonia	100	High	High	Poor	Unknown
Republic of Moldova	70	High	High	Poor	4 (0–24)
Russian Federation	Unknown	High	Poor	Poor	11 (1–21)
Serbia	78	High	High	Medium	17 (1–111)
Switzerland	86	High	High	High	Unknown
Turkey	28	High	High	Medium	28 (2–106)
Ukraine	1.96	Medium	Medium	Poor	3 (2–15)
United Kingdom	Unknown	Medium	High	High	Unknown
Kosovo ^g	90	High	High	Poor	6 (6–6)



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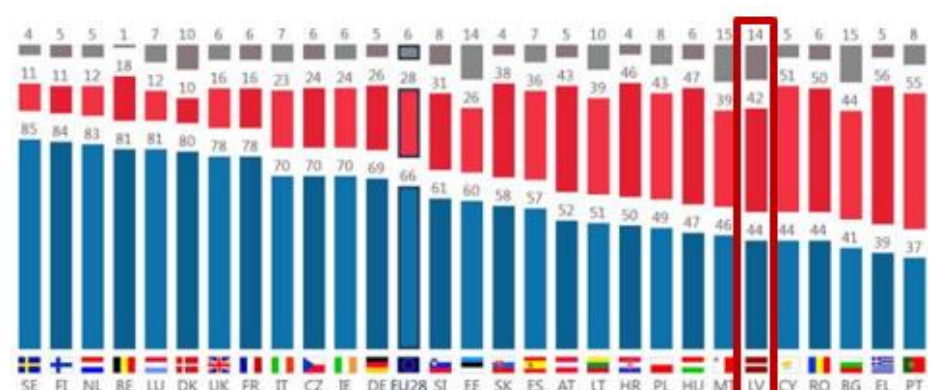
Challenge – Low Level of Public Knowledge and Awareness on Antibiotic Use

Antibiotics kill viruses 27% Correct

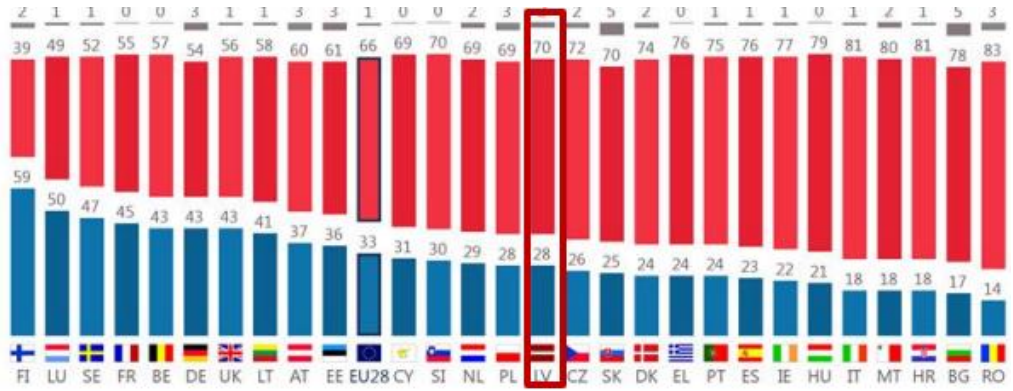


Correct Wrong Don't know

Antibiotics help in case of cold 44% Correct



Have you received information in the past 12 months that antibiotics are not used in common cold? 28% Correct

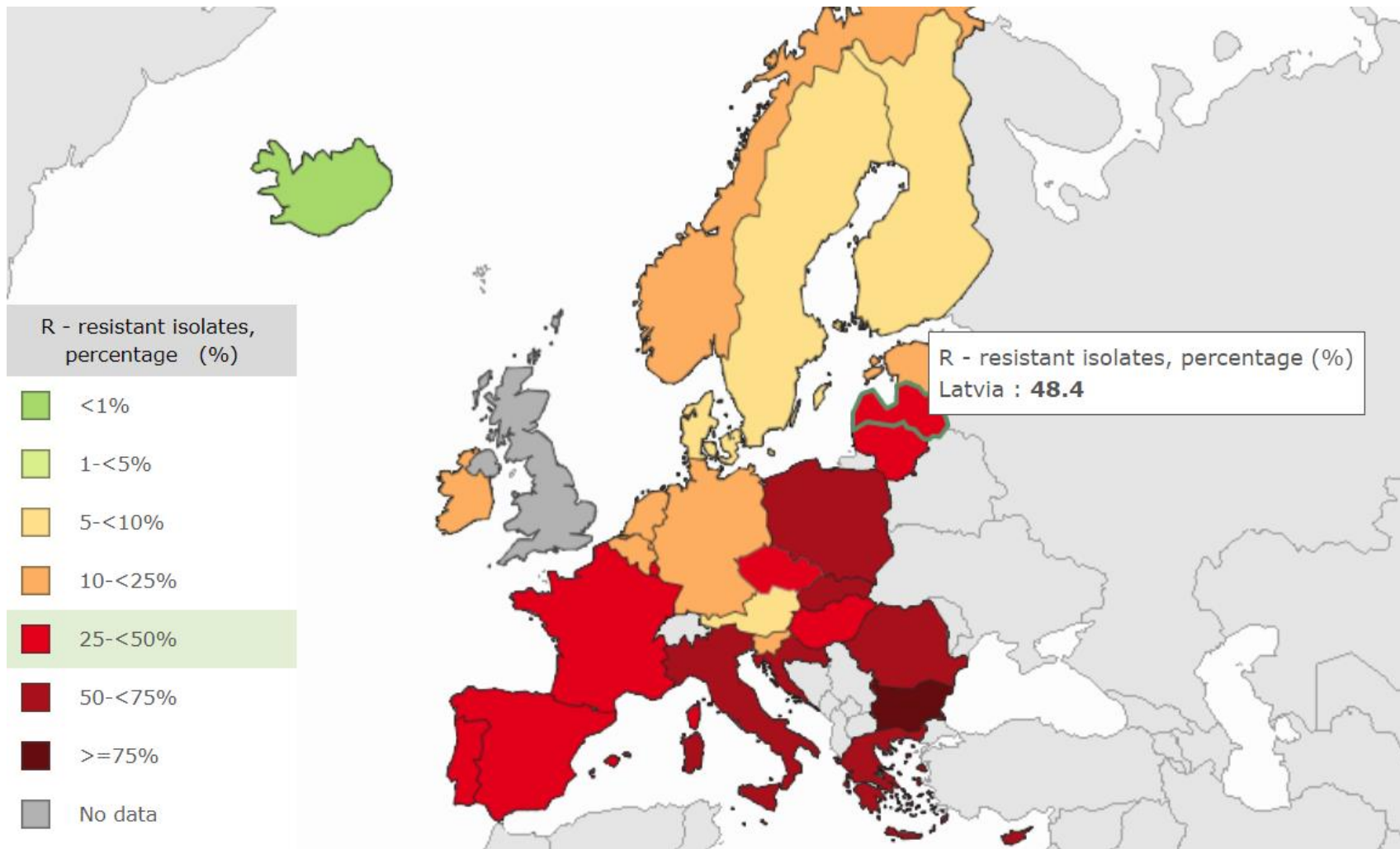


Yes No Don't know



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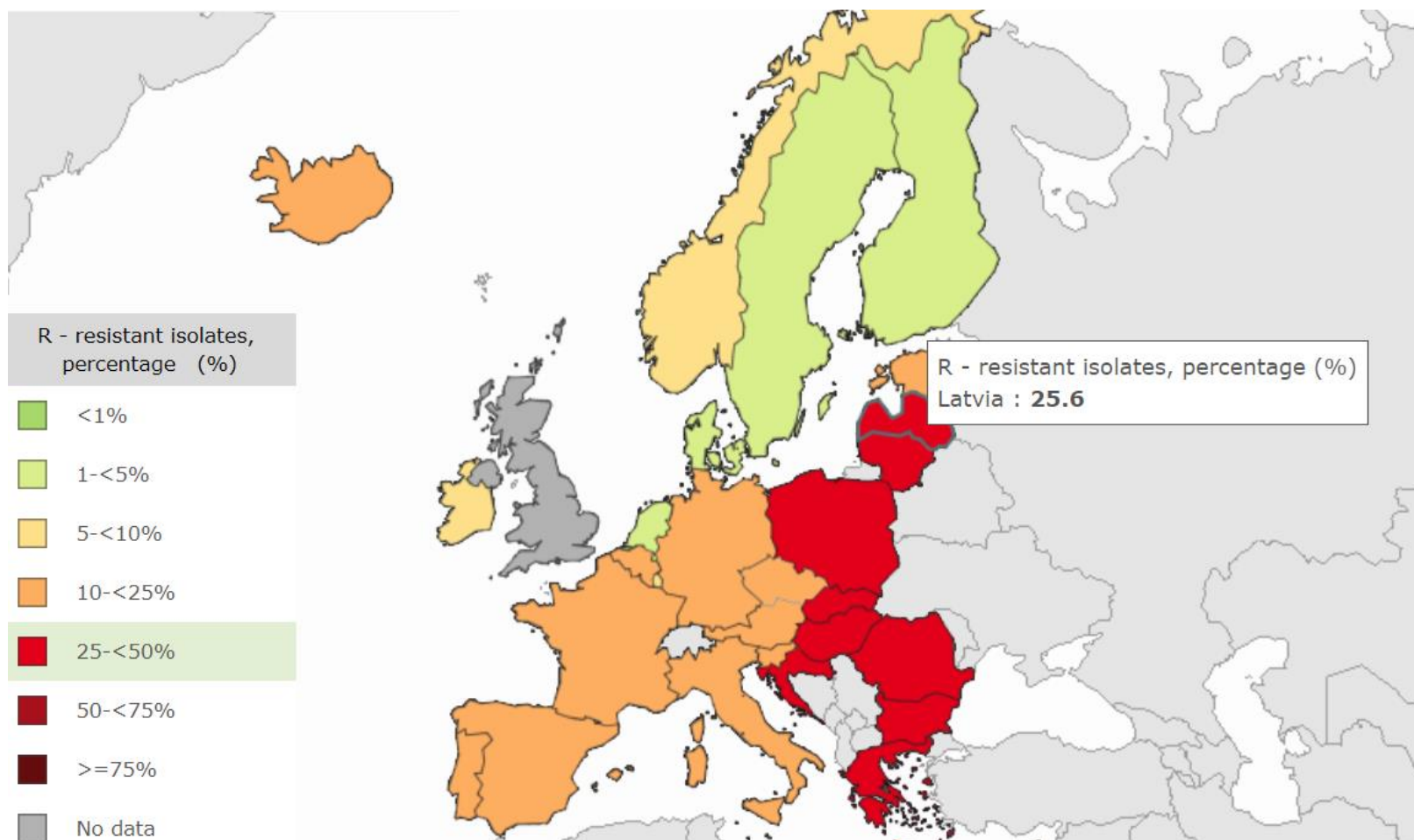
Third-generation cephalosporin-resistant *K.pneumoniae*





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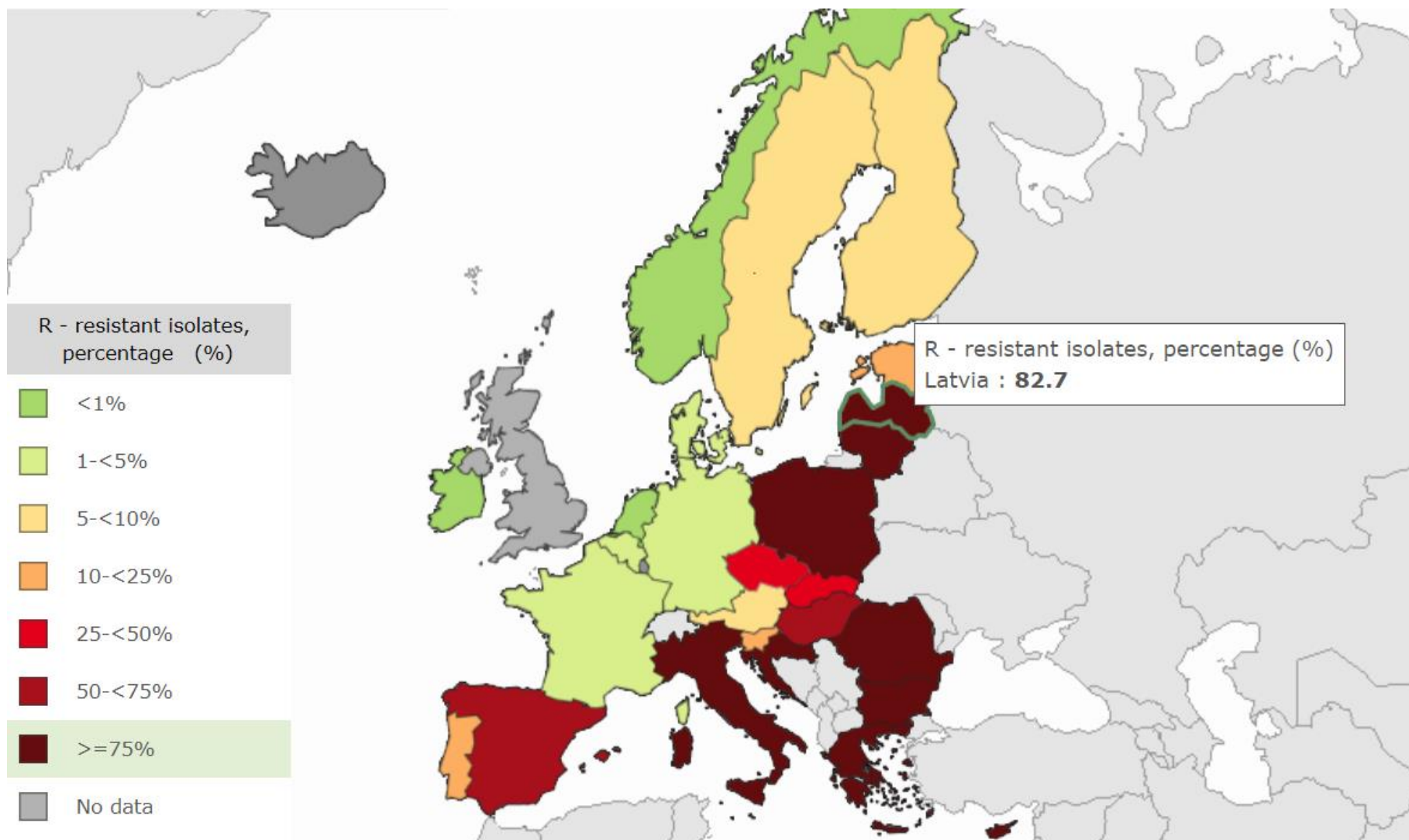
Carbapenem-resistant *P.aeruginosa*





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Carbapenem resistant *A.baumannii* (CRAB)





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Structural Reform Support Programme to “Support to the implementation of the One Health action plan for containing antimicrobial resistance in Latvia”

1. Expert mission of Swedish board of Agriculture and Public Health Agency of Sweden
2. Responsible institutions from Latvia’s side – Ministry of Health, Ministry of Agriculture and stakeholders from both sectors
3. 2. Outcomes:
 - 2.1. Sustainability plan for continued work on implementing the One Health NAP
 - 2.2. Toolboxes and training of trainers for strengthening of skills of health care professionals and animal farmers
 - 2.3. Roadmap for improvement of One Health intersectoral coordinating mechanism (ISM)
3. Beginning at the end of 2019 and final at the middle of June 2022 (overlapped with Covid-19 pandemic).



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Main benefits of the programme

1. Kept topic of AMR policy relevant during the Covid pandemic
2. Raised discussions on continuity of AMR policy implementation during the public health crisis
3. Facilitated work on AMR policy for next period with focus on sustainability of policy, and strengthening of intersectoral collaboration
4. Possibility to evaluate opportunities and challenges from the side within different stakeholders and sectors
5. Opportunity to learn best practices
6. Obtained additional tool for advocacy of AMR issues at the political agenda



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One Health AMR Action Plan 2023-2027

- Identified priority actions (not included in the previous policy planning document for 2019-2020)
- Unrealized actions from the previous policy planning document for 2019-2020 (transferred to the next policy planning period)
- Proposals from LATOHOP's (*EC supported project*) working groups regarding proposals on prioritisation of actions and available resources
- Experts' proposals on additional measures to be introduced (e. g. establishment of a competence centre of in the field of public health)



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International Documents

- EU One Health Action Plan against AMR (2017) and its key objectives:
 - making the EU a best practice region
 - boosting research, development and innovation
 - intensifying EU efforts worldwide to shape the global agenda on AMR
 - evaluation of policy implementation progress
- WHO Global Action Plan on AMR (2015)
- European strategic action plan 2011-2020
 - raise overall awareness about AMR
 - promote research-based knowledge
 - reduce the incidence of infectious disease
 - optimize the use of antimicrobial agents
 - promote sustainable investment, increase research into new and effective antibiotics, new diagnostic facilities for introduction of vaccines, etc., taking into account needs of all countries



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Policy Objective for the Next Period

- Promote targeted and effective control of limiting the spread of AMR, ensuring coordinated activities of involved authorities and organizations
- Change the behavior of use of antimicrobials by achieving responsible and prudent use of antimicrobials in society, in human and animal health



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Common Objectives (I)

- **Improve AMR monitoring**
 - Improve AMR surveillance
 - Promote the usage of microbiological analyses
- **Improve distribution, consumption, availability, monitoring/accounting of antimicrobials, promoting responsible and prudent use of antibiotics**
 - Improve availability of data about antibiotics consumption (in particular in hospitals)
 - Improve availability of data on antibiotics consumption habits in society
 - Develop guidelines for medical practitioners on responsible and prudent consumption of antibiotics
 - Create a national CIA list
 - Review of antibiotics compensation system



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Common Objectives (II)

- **Improve surveillance, control and prevention of infectious diseases**
 - Improve surveillance of healthcare-associated infections
 - Development guidelines for medical practitioners on prevention of infectious diseases during manipulations
- **Limiting spread of MR-TB**
 - Improve home care for TB patients
 - Improve availability of innovative medicines for TB treatment
 - Introduce the latest WHO guidelines on TB patients' treatment



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Common Objectives (III)

- **Strengthen institutional cooperation in AMR field**
 - Improve the coordinating role of Centre for Disease Prevention and Control in implementation of AMR policy
 - Rebuild structure of AMR Commission, strengthen its role in implementation and evaluation of AMR policy, as well in coordination in the field of AMR studies
 - Report on “One Health” AMR situation (every 3 years)
 - Promote cooperation in the field of animal and human health regarding monitoring of zoonoses (improved legislative acts)
 - Improve exchange of information between human health, animal health and environmental laboratories (developed cooperation mechanism, legal framework, IT tools)
 - Develop a methodology for monitoring AMR risk in waters



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Common Objectives (IV)

- **Promoting science and research in AMR field**
 - Carry out studies on the most effective interventions to limit the spread of AMR in the health sector (financed from the recovery financial instrument)
 - Identify studies to be taken as a priority in the field of human health, animal health and environment; exchange of information between all sectors on AMR research in different areas
- **Public awareness on AMR issues**
 - Update school education programs on AMR issues
 - Public awareness activities about most pressing AMR issues on a regular basis



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Common Objectives (V)

- **Strengthening laboratories capacity**
 - Strengthen the role of the national reference laboratory in the field of epidemiological safety regarding AMR surveillance, including methodological management
 - Introduce the latest laboratory investigation methods for AMR monitoring and diagnosis
 - Introduce electronic information exchange system on AMR testing results between laboratories
 - Introduce common testing standards for laboratories
- **Educate specialists and public on AMR issues**
 - Establish a competence centre on AMR issues in the field of public health
 - Update health-care students' education programs and post-graduate education programs on AMR issues
 - Organize "One Health" intersectoral conference (every 3 years)



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Thank you!

