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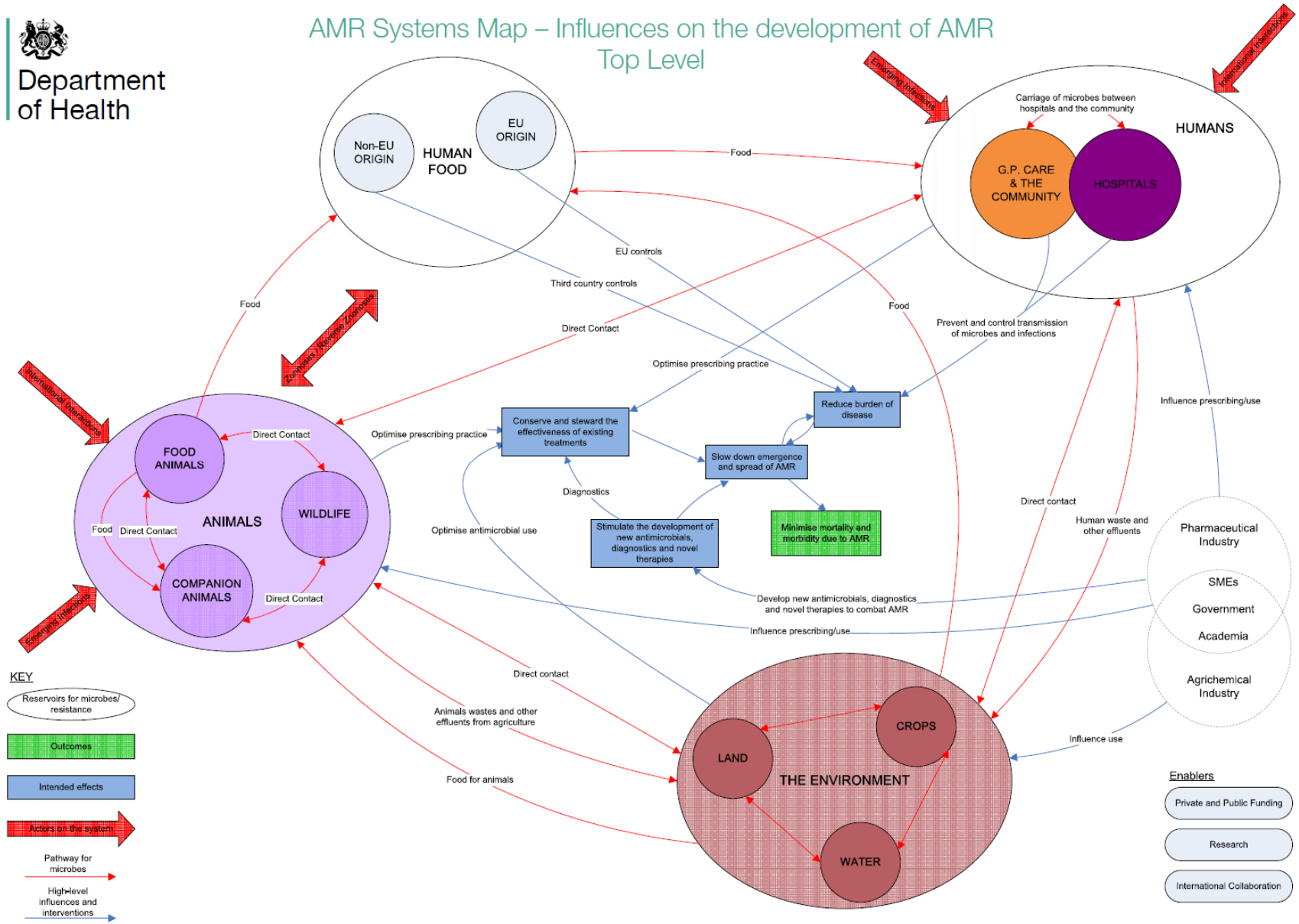
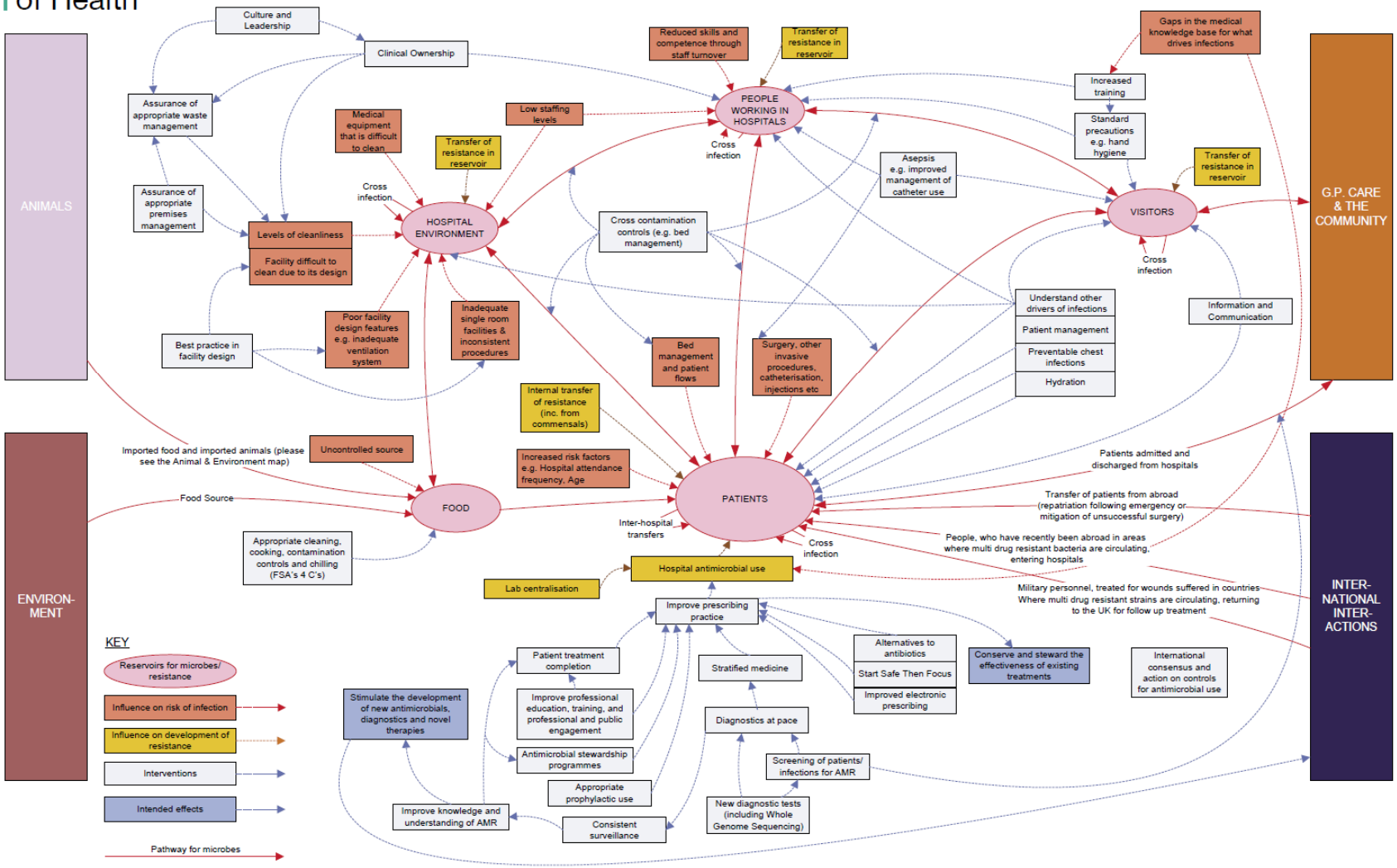


UK Department of Health. AMR Systems Map – Influences on the development of AMR, 2014

Department of Health

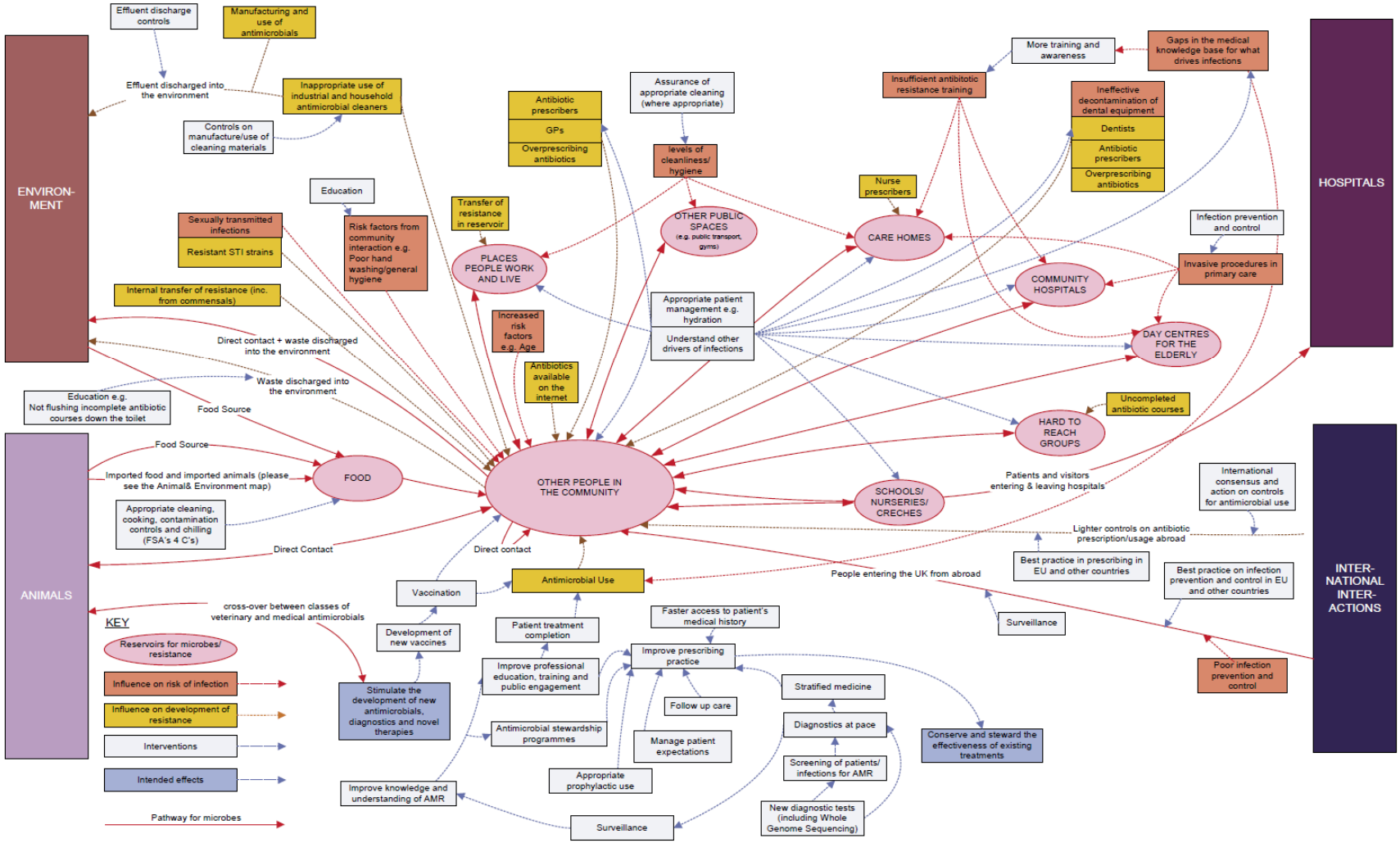
AMR Systems Map – Influences on the development of AMR
Hospital



UK Department of Health. AMR Systems Map – Influences on the development of AMR, 2014

Department of Health

AMR Systems Map – Influences on the development of AMR
G.P. Care and the Community



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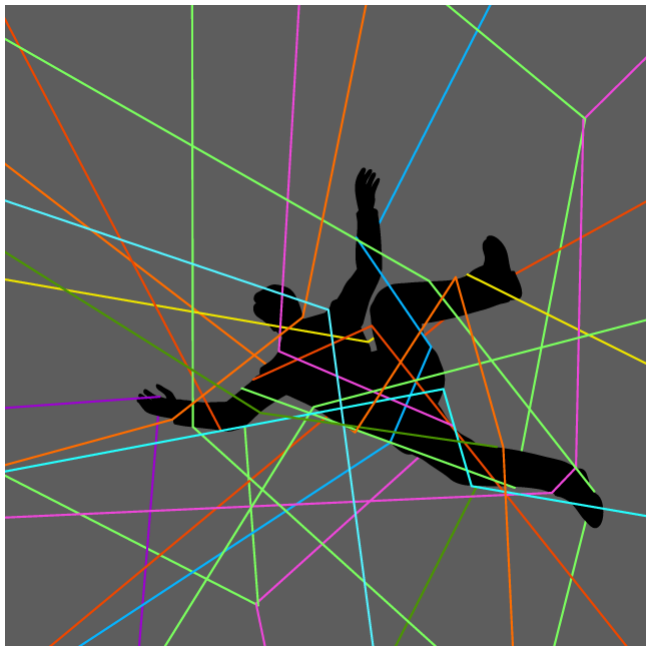

Complexity influences interventions because of:

- the **number of interacting components**,
- the **number and difficulty of behaviours required** by those delivering or receiving the intervention (Charani et al. 2014);
- the **number of groups or organizational levels targeted** by the intervention (Grundmann 2014; Tomson and Vlad 2014; Viana et al. 2014);
- the **number and variability of outcomes**;
- the **degree of flexibility or tailoring of the intervention permitted** (Craig et al. 2008; Petticrew 2011; Viana et al. 2014).

Bachero et al. Evolutionary Applications, 2014

Table 1. Feasibility–impact matrix of interventions against antimicrobial resistance.

Feasibility	Impact: High	Impact: Medium	Impact: Low
High	N – Substitution of antibiotics by other drugs (as anti-inflammatory compounds) in mild infectious diseases N – Vaccination-based interventions to decontaminate colonized hosts with resistant bacterial clones	N – Antiviral vaccination, reducing use of antibiotics in viral diseases	
Medium	N – Reduction in the local selective effect of antibiotics, as with inactivating or antibiotic-adsorbing compounds N – Decontamination of human and animal wastewater and sewage in villages, hospitals and farms T – Early identification of colonized patients by resistant bacteria prior to admittance in risk areas for transmission of resistant bacteria T – Interventions to reduce water and food to host transmission of antibiotic-resistant bacteria T – Decontamination procedures in cooking and handling of raw food	N – Patient's and general public educational interventions to reduce self-prescription N – Overall reduction of antibiotic use in humans, animals and agriculture N – New antimicrobial agents, antibiotic combinations, sequential use, cycling or mixing strategies of different drugs T – Interventions to reduce host-to-host transmission of antibiotic-resistant organisms in health workers (including hands washing) and farms N – Surface microbial decontamination of floors and equipment in hospitals and farms E – Early establishment of susceptible microbiota in human and animal newborns	N – Appropriate doses, generally high, to mutant prevention concentration N – Prevention of environmental releases and decontamination of antimicrobial substances, including biocides, metals and industrial pollutants
Low	E – Interventions aimed to select susceptible populations over resistant ones E – Clonal or population replacement of resistant organisms by homogenic susceptible ones E – Drug-based decontamination interventions for R bacteria with nonabsorbable antimicrobials E – Interventions directed to the maintenance and biorestoration of susceptible organisms	T – Prevention of human and animal crowding T – Containment measures for patients colonized with antibiotic resistance organisms T – Prevention of meat contamination by intestinal bacteria in slaughterhouses T – Irradiation of water and food E – Antagonistic pleiotropy strategies for selecting susceptible populations E – Interventions to decrease horizontal gene transfer of resistance genes to susceptible populations	N – Probiotic-prebiotics, clonal and microbiota-transplantation procedures for ecological displacement of R bacteria N – Interventions to reduce conditions enlarging the colonization with gamma-Proteobacteria and Firmicutes E – Interventions aiming to specific resistance gene decontamination in bacterial populations

N, interventions acting on number; T, interventions acting on transmission; E, interventions acting on ecology bioremediation of antibiotic resistance.

Bachero et al. Evolutionary Applications, 2014

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DGR 318/2013

«Linee di indirizzo per la gestione del rischio infettivo correlato all'assistenza»

- ✓ **Rischio infettivo maggiormente integrato** a livello aziendale (rischio clinico, governo clinico, Collegio di direzione)
- ✓ Controllo delle **infezioni** ma anche uso responsabile di **antibiotici**
- ✓ **Ospedale** ma anche **territorio**
- ✓ Ospedalità privata
- ✓ **Indicatori e standard**

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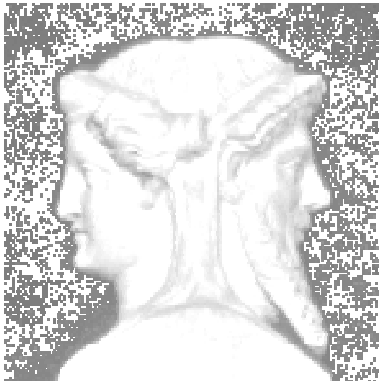

Corso di Formazione Regionale
Rete Giano

"Governo del rischio di Infezioni e Antibioticoresistenza – Nuclei Operativi in rete"

Corso di formazione regionale Rete Giano

- ✓ **Non competenze specialistiche** su infezioni, antibiotici e antibioticoresistenza ma acquisizione di **competenze metodologiche utili a promuovere interventi complessi**
- ✓ **Comunità di pratiche:** imparare dal confronto, condivisione di esperienze di successo, creazione di una rete permanente di professionisti
- ✓ **Project work:** di area vasta, occasione per declinare operativamente quanto appreso

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