AMR Trends in UTI: The need for Laboratory, Pharmacy and Clinic Collaboration at a Provincial Hospital

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Antimicrobial Resistance is one of the top ten threats to humanity. This is heavily fueled by antimicrobial overuse and misuse by healthcare practitioners. There is ongoing surveillance in Zimbabwe. However, the laboratory, the pharmacy and the clinic are generating individual sets of data that sent to their overseers in the respective divisions. As a result, the information does not quickly cascade back downwards to be mutually beneficial to all departments involved. Consequentially all information does not support new policy in the grass-root level. This is a report from observations at Victoria Chitepo Provincial Hospital in Manicaland, Zimbabwe. A study was done to describe the trends in etiology and AMR of UTI infections from 2017 to 2021 in Mutare. For the first time research data from the lab was presented to the hospital. Although gave good insight on which drug to avoid during empiric therapy, some other issues of concern were noted. 1. Some drugs that the laboratory was using for testing were not available in the Pharmacy or the local market. Therefore, even if the drugs were reported the information was not very useful to the clinician. 2. The platform for clinician-laboratory feedback on the needs of the clinicians and feedback on the usefulness of the patient results was not being fully exploited. 3. There was need for a continuous monitoring of hospital epidemiological trends and a sustained round table for lab-pharmacy-clinic interface. From the recommendations the following items were adopted. 1. Monthly Pharmacy Lab liaison on drug availability in the pharmacy and lab adopts the available drugs for AST. 2. Quarterly reporting on the Susceptibility trends in AST, 3. Regular Customer satisfaction survey from clinician on the usefulness of laboratory results. Based on the 3-month results, some progress is noted. Higher order policies that promote interdepartmental collaboration is indeed necessary for better patient management and reduction of AMR.