

# Containing Antibiotic Resistance:

## A One Health Chinese-Swedish Research Collaboration

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One Health approaches are needed to minimise emergence and dissemination of resistant bacteria. IMPACT is a research programme supported by eleven universities and institutions in China and Sweden with expertise in human, animal and environmental health. The mixed methods programme has two components:

- 1) Data collection to increase knowledge of the complex routes of dissemination of antibiotic resistance between different sectors, and of factors influencing irrational use of antibiotics in humans and animals
- 2) Designing, implementing and evaluating a pilot intervention to limit development and spread of AMR

### Planning phase

- Establishing specific research questions and methods
- Development of study tools
- Selection of study sites and basic data collection
- Capacity building through workshops

### Qualitative data collection

- Six focus group discussions with village residents
- Semi-structured interviews with village clinic doctors

### Continuous data collection

#### *Clinical isolates*

Collected at the town hospital (MRSA and ESBL-producing *Enterobacteriaceae*)

#### *Village clinic prescriptions*

600 prescriptions per year at each clinic

#### *Household antibiotic use*

Antibiotic consumption for humans and pigs monitored at 200 households for 15 months



2014

2015

2016

2017

2018

### Baseline cross-sectional data collection

#### *Household questionnaires*

Rural residents in 769 households were asked about their knowledge, attitudes and practices regarding antibiotic use and resistance for humans and pigs, and about their health seeking behaviours

#### *Microbiology sampling*

Commensal samples were taken at households from humans and from pigs. Analyses focus on carriage of MRSA and ESBL-producing *Enterobacteriaceae*  
Environmental samples were also taken from drinking water sources, rivers, wastewater, vegetables and soil

### Pilot intervention

- Six intervention villages
- Six control villages
- One year intervention period

#### *For rural residents*

Information on antibiotics and aspects about antibiotic use and antibiotic resistance in humans, animals and environment:

- Audiotapes (three times a week on village speakers)
- One lecture every three months
- Booklets and posters

#### *For healthcare practitioners*

Training programmes for veterinarians and village clinic doctors, once every three months on:

- Rational antibiotic use
- Infection prevention and control

### Post-intervention cross-sectional data collection

Following the same pattern as the baseline

### Lessons learned

*One Health understanding:* Time must be invested to develop shared conceptual frameworks among all researchers, and for joint planning of data collection

*Communication:* Regular contact is essential, both within smaller task focused working groups and programme wide

*Harmonising data:* A labelling system can facilitate linking different data types, together with regular quality checking