



MURIA VIRTUAL MINI-CONFERENCE

OCTOBER 13 & 14, 2020

THEME: MEDICINES UTILISATION RESEARCH IN AFRICA: PRESENT STATUS AND FUTURE DIRECTIONS

TOPICS

1. *Utilization of medicines for NCDs (hypertension, diabetes mellitus, cancers etc.)*
2. *Antimicrobial resistance and stewardship*
3. *Medication adherence and persistence*
4. *Other topics in the field of drug utilization research*
5. *Medicines specifically used for managing COVID-19*

To ensure consistency, all abstract submissions must be made on this form.

Title of the abstract:	A multicentre point prevalence survey of hospital antimicrobial prescribing and quality indices in the Kurdistan Regional Government of Northern Iraq: The need for urgent action
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Abstract (max 300 words. Minimum font size – Arial 10 or equivalent)

Background:

Rationale antimicrobial use is crucial to address antimicrobial resistance (AMR) threats. No study has been undertaken in Iraq, using validated methodologies, to document current antimicrobial use and areas for improvement given high AMR rates.

Objectives:

To assess antibiotic prescribing patterns in this region using the Global PPS methodology to identify targets for quality improvement

Methods:

Point prevalence survey (PPS), using the Global PPS methodology, conducted among the three major public hospitals in Kurdistan Regional Government (KRG)/northern Iraq from September-December 2019. Prevalence and quality of antibiotic use were estimated/assessed using agreed quality indicators.

Results:

Prevalence of antibiotic use was high (93.7%;n=192/205); with third generation cephalosporins as the most commonly prescribed antibiotics (52.6%;n=140/266). Reasons for treatment was recorded for only 61.7% (n=164/266) of antibiotics and high use (89.9%) of parenteral therapy was observed. All therapy was empirical, no stop/review dates were recorded and no treatment guidelines were available. Majority of the prescribed antibiotics (62%; n=165/266) were from the WHO Watch list.

Conclusions:

Prevalence of antibiotic use was the highest not only in the region but globally including Africa, coupled with significant evidence of sub-optimal prescribing practice. Swift action is needed to improve future prescribing to reduce AMR. One-two areas should initially be targeted for quality improvement including development of local guidelines, documentation of antibiotic indication and/or stop/review dates.

Once completed, the abstract must be emailed to Joseph Fadare (joseph.fadare@eksu.edu.ng)

