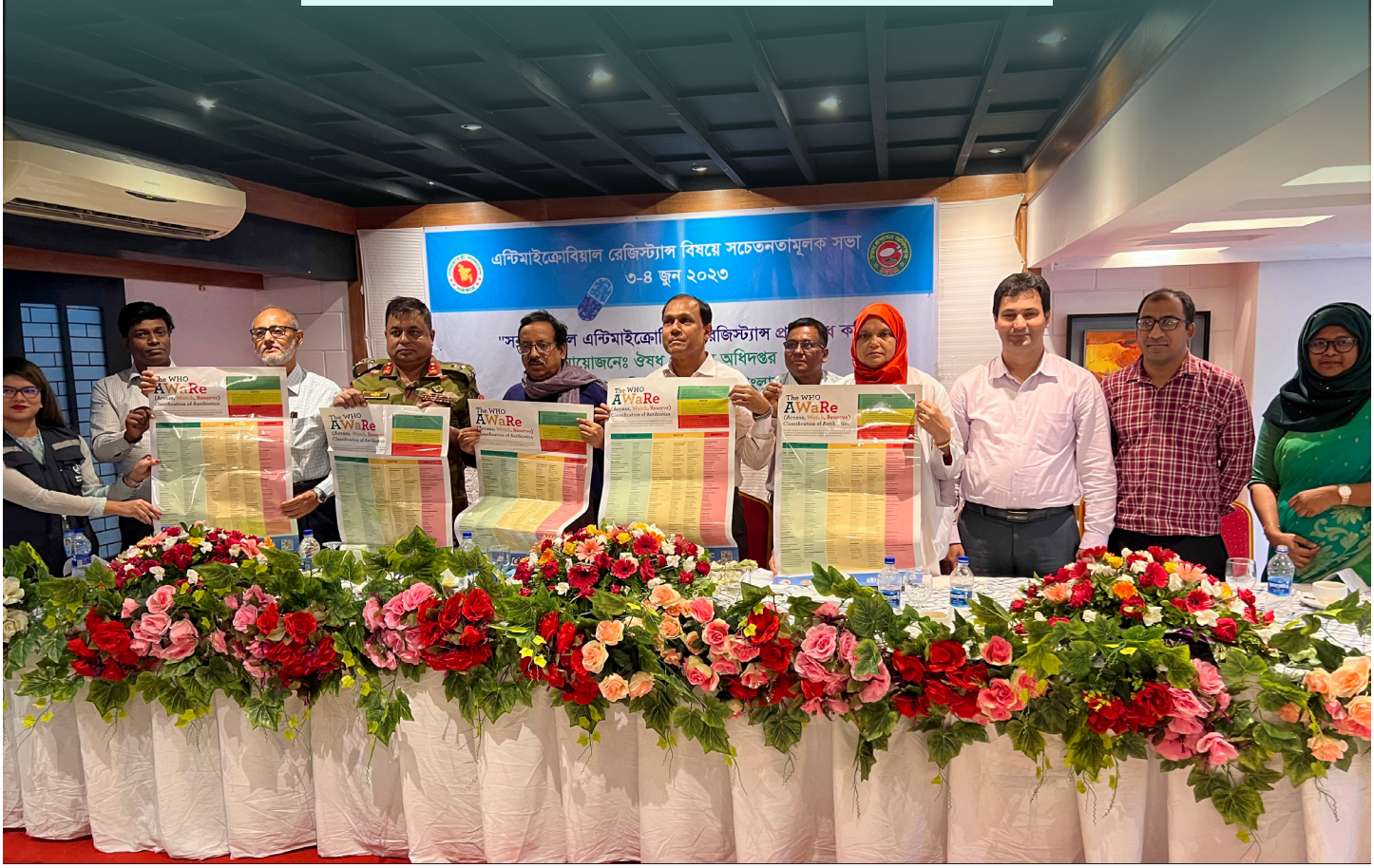
গণপ্রজাতন্ত্রী বাংলাদেশ সরকার

DGDA

AMR BULLETIN

June 2023 | Issue-3



Bulletin Issue-3 Topics

Major General Mohammad Yousuf

Director General
Directorate General of Drug Administration

In Bangladesh, the urgent issue of antimicrobial resistance (AMR) demands immediate attention. Infectious diseases pose significant health challenges, complicatedly linked to our living environment in this hot and humid climate.

In a collaborative effort to tackle AMR, the Directorate General of Drug Administration (DGDA) is actively partnering with WHO BAN and other stakeholders to conduct awareness activities at the divisional level. Workshops targeting drug sellers and physicians in Rajshahi and Chattogram have been organized. As a crucial tool in promoting responsible prescribing practices, DGDA has developed and launched the WHO AWaRe poster with technical and financial support from WHO BAN and collaboration with CDC, DGHS. It is essential for healthcare professionals to keep up with this classification and adhere to antimicrobial stewardship guidelines. Additionally, drug sellers become aware about the new drug law regarding the penalty of selling antibiotics without prescription.

By uniting our efforts, we can combat AMR and safeguard the effectiveness of antibiotics for future generations. Let us work together to ensure appropriate antibiotic use, embracing antimicrobial stewardship and keep up with the AWaRe classification. Together, we can make a significant impact.

Md. Mostafizur Rahman

Director
Directorate General of Drug Administration & National Focal on AMC surveillance in Bangladesh

DGDA actively contributes to AMR efforts through a number of activities implemented throughout the year. This includes participation in important global joint summits, reporting to WHO GLASS-AMC, and working to digitize AMC surveillance in Bangladesh for improved monitoring and control. Additionally, divisions are targeted to spread the AMR knowledge and preventive measures. Basically, physicians and drug sellers are getting more information about AMR from these awareness workshops. Besides, DGDA has also inaugurated WHO AWaRe poster which includes the list of WHO AWaRe classification of antibiotics. It is already distributed to physicians in Chattogram to further equip them with the knowledge of rational antibiotic prescribing as well as provide constant reminder of the responsible selection of antibiotics while practicing. DGDA's efforts to combat AMR countrywide will continue with WHO BAN's support through DGDA AMR Cell.

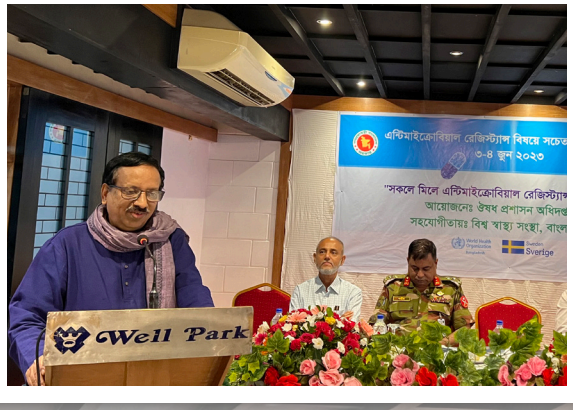
AMR Awareness Programs with Drug Sellers and Physicians in Rajshahi and Chattogram Divisions

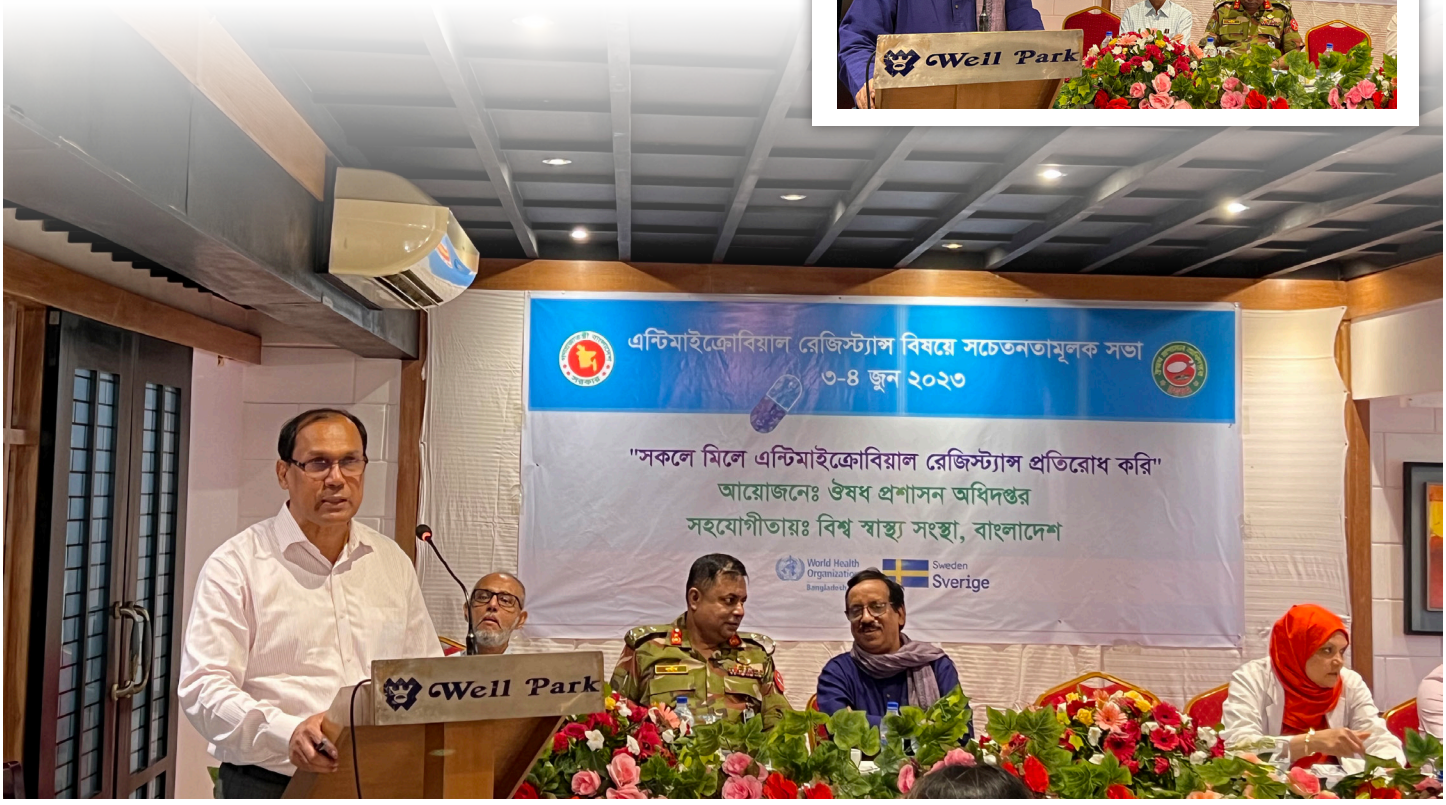
The Directorate General of Drug Administration (DGDA) recently conducted a series of highly impactful awareness programs on antimicrobial resistance (AMR) in Rajshahi and Chattogram Divisions. In collaboration with prominent health service related institutions such as the Centers for Disease Control and Prevention (CDC), the Institute of Epidemiology, Disease Control, and Research (IEDCR), and the Directorate General of Health Services (DGHS), DGDA organized these programs to educate drug sellers and to provide recent information regarding AMR to the physicians about the critical issue of AMR.

Supported by the World Health Organization (WHO) and the Swedish International Development Cooperation Agency (SIDA) both financially and technically, these programs provided a platform for disseminating essential information and fostering collaboration among stakeholders.

During the programs, DGDA presented crucial data on antimicrobial consumption surveillance, shedding light on prevailing usage patterns. This information highlighted the growing concern of AMR and underscored the need for responsible prescribing practices. Additionally, IEDCR shared AMR surveillance data, emphasizing the importance of surveillance in monitoring resistance patterns and guiding treatment decisions.

One of the highlights of the programs was the presence of the CDC, who





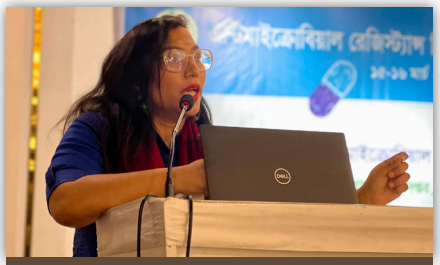
AMR Awareness Program in Chittagong; 03 June, 2023.

Brigadier General Shamim Yajdani, Director, Rajshahi Medical College Hospital.

Mr. Md. Mostafizur Rahman, Director, DGDA

Ms. Sabiha Sultana, ADM, office of District Commissioner, Rajshahi District.

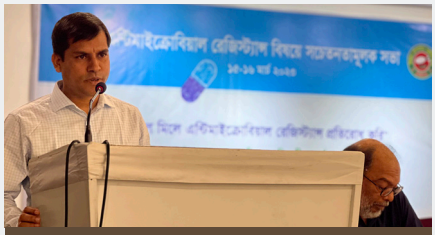
Mr. Md. Shafiqul Islam, Director, DGDA.



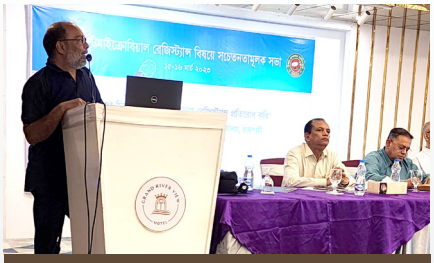
Ms. Raian Amzad, Senior Technical Advisor, BHB, MSH.

These guidelines aimed to provide more information to the physicians on the importance of AMR, introduce them to the AWaRe classification of antibiotics, and emphasize the significance of accurate diagnosis before prescribing antimicrobial drugs. Armed with this knowledge, physicians are better equipped to make informed decisions and use antibiotic with caution.

The programs also focused on educating drug sellers and pharmacy retailers. Participants gained a deep understanding of the regulations governing over-the-counter (OTC) sales of antibiotics and were acquainted with the objectives of the red labeling on antibiotic packaging.

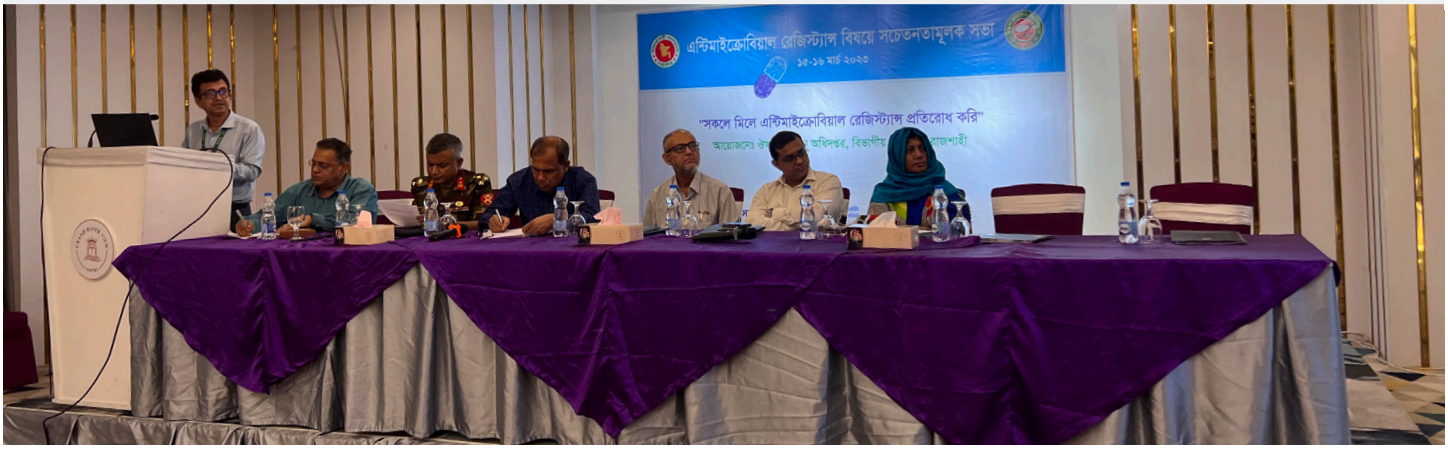


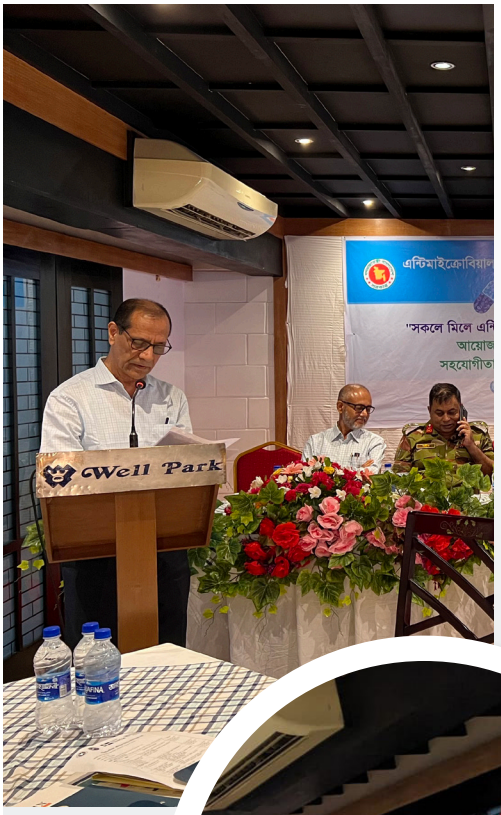
Md. Abdul Bari, Assistant Director, DGDA.

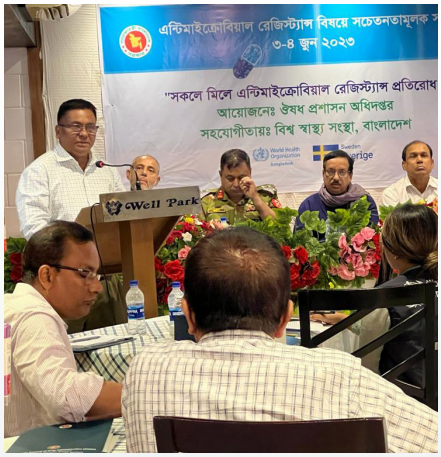


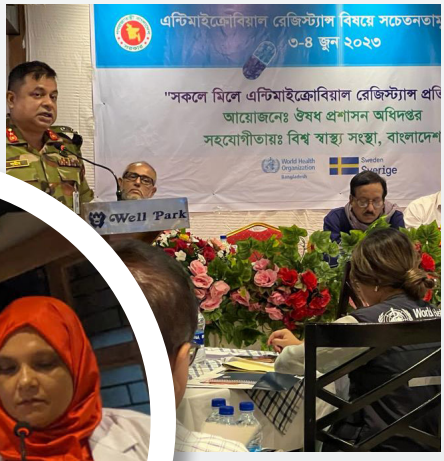
Dr. Md. Taufiq Alam, Professor, Applied Chemestry and Chemical Engineering, Rajshahi University.

By understanding their responsibilities, drug sellers and pharmacy retailers play a vital role in ensuring the responsible distribution of antibiotics and reducing their misuse.









The AMR awareness program in Chittagong (03-04 June, 2023)

The presence of Major General Mohammad Yousuf, Director General of DGDA, made the sessions highly interactive and effective. Participants had the opportunity to engage with experts, ask questions, and seek clarification, fostering a comprehensive learning environment.

As part of their commitment to raising awareness, DGDA, in collaboration with CDC,DGHS, introduced the WHO-AWaRe Poster, an educational resource designed to disseminate vital information about antimicrobial stewardship. These posters were distributed among physicians, serving as a constant reminder of the principles and practices necessary to combat AMR effectively.

The AMR awareness programs conducted by DGDA in Rajshahi (15-16 March 2023) and Chattogram Divisions (03-04 June 2023) are pivotal in the battle against AMR. By equipping drug sellers, physicians, and pharmacy retailers with knowledge, guidelines, and resources, these programs aim to bring about tangible changes in prescribing behaviors and medication distribution practices.

Through collaborative efforts and continued education, we can safeguard the effectiveness of antimicrobial drugs, ensuring their availability for future generations. The Directorate General of Drug Administration along with its esteemed partners is committed to addressing the global challenge of AMR and fosters a healthier, antimicrobial-resilient society.

World Health Organization | South-East Asia | Bangladesh

DGDA Empowers Physicians with the WHO AWaRe Poster to Combat Antibiotic Resistance

10 July 2023, Bangladesh

To combat the global health concern of antibiotic resistance, and focus on the importance of rational antibiotic use, the Directorate General of Drug Administration (DGDA) conducted an awareness program in Chittagong on 3 June 2023. As part of this initiative, the DGDA introduced healthcare professionals to the WHO AWaRe (Access, Watch, Reserve) classification, a tool developed by the World Health Organization (WHO) to guide prescribers in selecting appropriate antibiotics for common infections.

The AWaRe classification categorizes antibiotics into three groups based on their efficacy and importance in treating specific infections. By understanding and utilizing this classification, prescribers can make informed decisions when it comes to selecting antibiotics. The primary goal is to promote rational antibiotic use, ensuring that the right antibiotics are prescribed for the right infections, minimizing the risk of resistance, and preserving the effectiveness of these life-saving drugs for future generations.

During the awareness program, Major General Mohammad Yousuf, Director General of DGDA, inaugurated the AWaRe poster publication, which highlights the key principles of the classification system. The poster, endorsed by the WHO, serves as a valuable resource for physicians, aiding them in choosing the most appropriate antibiotics for their patients. By adhering to the AWaRe recommendations, prescribers can prioritize the use of antibiotics that are effective, easily accessible, and less likely to contribute to resistance (Access group). Simultaneously, the classification discourages the unnecessary use of last-resort antibiotics, reserving them for severe infections to combat resistance (Reserve group). The program stressed the significance of accurate diagnosis before prescribing antimicrobial drugs. Through accurate diagnosis, healthcare professionals can ensure that antibiotics are administered when truly needed, avoiding overuse and misuse. By doing so, they play a crucial role in safeguarding public health and contributing to the global fight against antibiotic resistance.

The AWaRe classification also supports antibiotic stewardship programs, which aim to optimize antibiotic use and minimize resistance. By providing a standardized approach to antibiotic selection, the AWaRe classification facilitates coordination and communication among healthcare providers, pharmacists, and policymakers. This poster improved antibiotic stewardship practices and ensured the judicious use of antibiotics throughout the healthcare system.

The DGDA's efforts to raise awareness about the WHO AWaRe classification in Chittagong and distribute the AWaRe poster among physicians mark an important step toward combatting antibiotic resistance. By equipping prescribers with the knowledge and tools needed to make informed decisions, the DGDA is empowering healthcare professionals to play a pivotal role in preserving the effectiveness of antibiotics and protecting public health.

In conclusion, the WHO AWaRe classification system serves as a global standard for rational antibiotic use. With the support of the DGDA in the inauguration of the AWaRe poster, physicians in Chittagong are now equipped to prioritize antibiotics effectively, combat resistance, and contribute to the responsible use of these vital drugs. By working together, healthcare professionals can play a significant role in ensuring a healthier future for all.

https://www.who.int/bangladesh/news/detail/10-07-2023-dgda-empowers-physicians-with-the-who-aware-poster-to-combat-antibiotic-resistance

The WHO AWaRe (Access, Watch, Reserve) Classification of Antibiotics

The WHO AWaRe Classification of Antibiotics is intended to be used as a tool for countries to better support antibiotic monitoring and stewardship activities. It classifies antibiotics into three groups: Access, Watch and Reserve.

https://www.who.int/publications/i/item/2021-aware-classification

ACCESS

Antibiotics that represent first or second-line for empirical treatment of common infectious syndromes based on a systematic assessment of the available evidence and that have a favorable safety profile with a low propensity to further aggravate AMR. All Access antibiotics are part of the EML core list, meaning that these antibiotics should be widely available in all settings (while still making efforts to ensure their appropriate use). Many penicillins belong to this class.

WATCH

Antibiotics that present a higher potential to negatively impact AMR. Some Watch group antibiotics are also included in the EML core list since they are the most effective options for a limited group of well-defined clinical syndromes, but their use should be tightly monitored and restricted to the limited indications. Fluoroquinolones, which are unfortunately commonly used in many settings, belong to the Watch group as their use should be avoided for indications for which they are no longer first or second choice.

RESERVE

"Last-resort" antibiotics, that have activity against multi (MDR)- or extensively (XDR) resistant bacteria, and therefore represent a valuable, non-renewable resource that should be used as sparingly as possible. Some of the newly approved antibiotics (e.g. ceftazidime-avibactam) fall into this class, as do some of the older "rediscovered" antibiotics (e.g. polymyxins).

ACCESS

Aminocyclitols:
Spectinomycin

Aminoglycosides:
Amikacin
Gentamicin

Amphenicols:
Chloramphenicol
Thiamphenicol

Beta-lactam/ beta-lactamase-inhibitor:
Amoxicillin/clavulanic-acid
Ampicillin/sulbactam
Sultamicillin

Beta-lactamase-inhibitors:
Sulbactam

First-generation-cephalosporins:
Cefacetrile
Cefadroxil
Cefalexin
Cefaloridine
Cefalotin
Cefapirin
Cefatrizine
Cefazedone
Cefazolin
Cefradine
Cefroxadine
Ceftezole

Imidazoles:
Metronidazole_IV
Metronidazole_oral
Ornidazole_IV
Ornidazole_oral
Secnidazole
Tinidazole_IV
Tinidazole_oral

Lincosamides:
Clindamycin

Nitrofuran derivatives:
Furazidin
Nifurtoinol

Nitrofuran-derivatives:
Nitrofurantoin

Sulfonamide-trimethoprim combinations:
Sulfadiazine/tetroxoprim
Sulfadiazine/trimethoprim
Sulfadimidine/trimethoprim
Sulfamerazine/trimethoprim
Sulfamethoxazole/trimethoprim
Sulfametrole/trimethoprim
Sulfamoxole/trimethoprim

Penicillins:
Amoxicillin
Ampicillin
Azidocillin
Bacampicillin
Benzathine-benzylpenicillin
Benzylpenicillin
Clometocillin
Cloxacillin
Dicloxacillin
Epicillin
Flucloxacillin
Hetacillin
Mecillinam
Metampicillin
Meticillin
Nafcillin
Oxacillin
Penamecillin
Phenoxymethylpenicillin
Pivampicillin
Pivmecillinam
Procaine-benzylpenicillin
Propicillin
Talampicillin

Sulfonamides:
Sulfadiazine
Sulfadimethoxine
Sulfadimidine
Sulfafurazole
Sulfaisodimidine
Sulfalene
Sulfamazone
Sulfamerazine
Sulfamethizole
Sulfamethoxazole
Sulfamethoxypyridazine
Sulfametomidine
Sulfametoxydiazine
Sulfamoxole
Sulfanilamide
Sulfaperin
Sulfaphenazole
Sulfapyridine
Sulfathiazole
Sulfathiourea

Tetracyclines:
Doxycycline
Tetracycline

Trimethoprim-derivatives:
Brodimoprim
Trimethoprim

WATCH

Aminoglycosides:
Arbekacin
Bekanamycin
Dibekacin
Isepamicin
Kanamycin_IV
Kanamycin_oral
Micronomicin
Neomycin_IV
Neomycin_oral
Netilmicin
Ribostamycin
Sisomicin
Streptoduocin
Streptomycin_IV
Streptomycin_oral
Tobramycin

Beta-lactam/beta-lactamase-inhibitor_anti-pseudomonal:
Piperacillin/tazobactam

Beta-lactamase-inhibitors:
Tazobactam

Carbapenems:
Biapenem
Doripenem
Ertapenem
Imipenem/cilastatin
Meropenem
Panipenem
Tebipenem

Fluoroquinolones:
Ciprofloxacin
Delafloxacin
Enoxacin
Fleroxacin
Garenoxacin
Gatifloxacin
Gemifloxacin
Grepafloxacin
Lascufloxacin
Levofloxacin
Levonadifloxacin
Lomefloxacin
Moxifloxacin
Norfloxacin
Ofloxacin
Pazufloxacin
Pefloxacin
Prulifloxacin
Rufloxacin
Sitafloxacin
Sparfloxacin
Temafloxacin
Tosufloxacin
Trovafloxacin

Fourth-generation-cephalosporins:
Cefepime
Cefoselis
Cefozopran
Cefpirome

Glycopeptides:
Teicoplanin
Vancomycin_IV
Vancomycin_oral

Lincosamides:
Lincomycin

Macrolides:
Azithromycin
Clarithromycin
Dirithromycin
Erythromycin
Fidaxomicin
Flurithromycin
Josamycin
Midecamycin
Miocamycin
Oleandomycin
Rokitamycin
Roxithromycin
Solithromycin
Spiramycin
Telithromycin
Troleandomycin

Penicillins:
Aspoxicillin
Azlocillin
Carbenicillin
Carindacillin
Mezlocillin
Pheneticillin
Piperacillin
Sulbenicillin
Temocillin
Ticarcillin

Phenol derivatives:
Clofoctol

Phosphonics:
Fosfomycin_oral

Quinolones:
Cinoxacin
Flumequine
Nemonoxacin
Oxolinic-acid
Pipemidic-acid
Piromidic-acid
Rosoxacin

Rifamycins:
Rifabutin
Rifampicin
Rifamycin_IV
Rifamycin_oral
Rifaximin

Second-generation-cephalosporins:
Cefaclor
Cefamandole
Cefbuperazone
Cefmetazole
Cefminox
Cefonicid
Ceforanide
Cefotetan
Cefotiam
Cefoxitin
Cefprozil
Cefuroxime
Flomoxef
Loracarbef

Steroid antibacterials:
Fusidic-acid

Streptogramins:
Pristinamycin

Tetracyclines:
Chlortetracycline
Clomocycline
Demeclocycline
Lymecycline
Metacycline
Minocycline_oral
Oxytetracycline
Penimepicycline
Rolitetracycline
Sarecycline

Third-generation-cephalosporins:
Cefcapene-pivoxil
Cefdinir
Cefditoren-pivoxil
Cefetamet-pivoxil
Cefixime
Cefmenoxime
Cefodizime
Cefoperazone
Cefotaxime
Cefpiramide
Cefpodoxime-proxetil
Cefsulodin
Ceftazidime
Cefteram-pivoxil
Ceftibuten
Ceftizoxime
Ceftriaxone
Latamoxef

RESERVE

Aminoglycosides:
Plazomicin

Carbapenems:
Imipenem/cilastatin/relebactam
Meropenem/vaborbactam

Fifth-generation cephalosporins:
Ceftaroline-fosamil
Ceftobiprole-medocaril
Ceftolozane/tazobactam

Glycopeptides:
Dalbavancin
Oritavancin
Telavancin

Glycylcyclines:
Tigecycline

Lipopeptides:
Daptomycin

Monobactams:
Aztreonam
Carumonam

Other-cephalosporins:
Cefiderocol

Oxazolidinones:
Linezolid
Tedizolid

Penems:
Faropenem

Phosphonics:
Fosfomycin_IV

Pleuromutilin:
Lefamulin

Polymyxins:
Colistin_IV
Colistin_oral
Polymyxin-B_IV
Polymyxin-B_oral

Streptogramins:
Dalfopristin/quinupristin

Tetracyclines:
Eravacycline
Minocycline_IV
Omadacycline

Third-generation-cephalosporins:
Ceftazidime/avibactam

Trimethoprim-derivatives:
Iclaprim

Sweden
Sverige

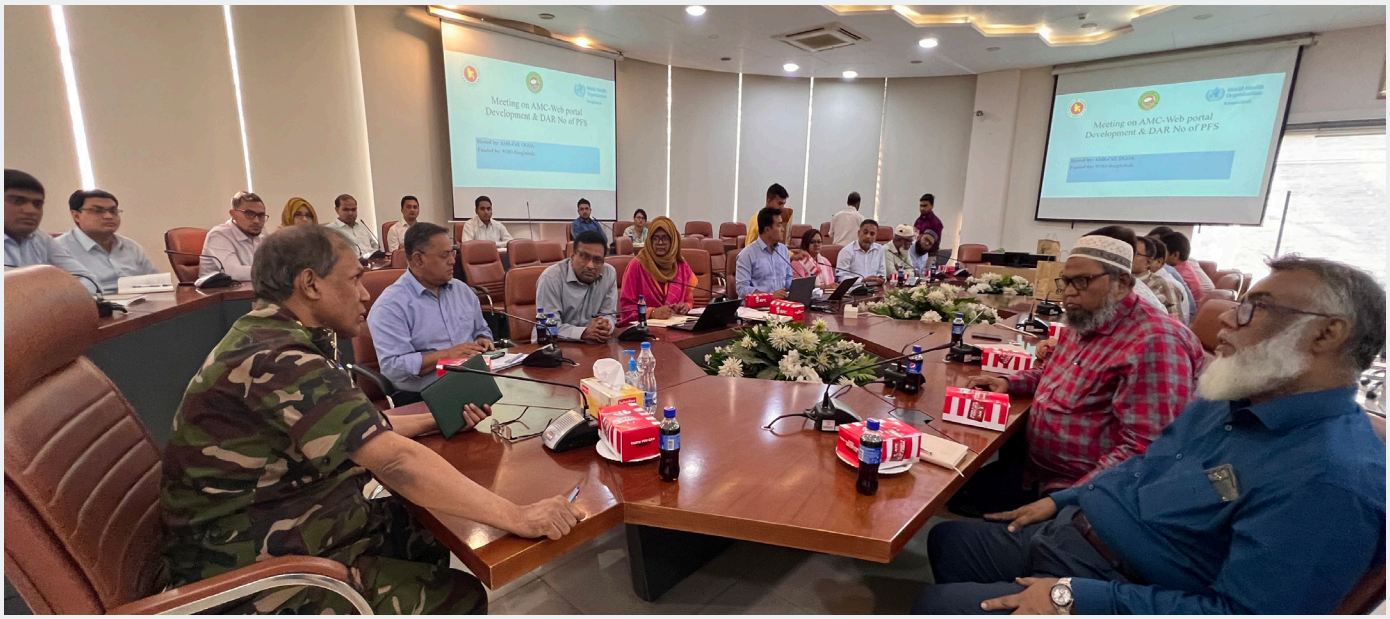
World Health Organization
Bangladesh

Enhancing Antimicrobial Resistance Surveillance: GLASS-AMC and Digitalizing AMC Monitoring in Bangladesh

GLASS-AMC, which stands for Global Antimicrobial Resistance Surveillance System - Antimicrobial Consumption, is a monitoring system that tracks the use of antimicrobial agents (AMC) at the national level. The data collected by GLASS-AMC is derived from various aggregated sources, ranging from macro-level data such as imports, distribution, and sales, to micro-level data including prescriptions, dispensing, and insurance records. This comprehensive approach provides insights into the types and quantities of antimicrobials utilized in specific settings over defined periods.

The enrollment process for countries, territories, and areas into the GLASS-AMC module was initiated in December 2020. In November 2022, the Directorate General of Drug Administration (DGDA) in Bangladesh joined the WHO-GLASS program, demonstrating their commitment to combatting antimicrobial resistance. The digitalization of AMC surveillance is a crucial objective outlined in Bangladesh's National Strategy and Action Plan for Antimicrobial Resistance Containment.

On May 27, 2021, the Taskforce responsible for monitoring AMC/AMU surveillance in Bangladesh discussed the implementation of AMC surveillance. Recognizing the importance of accurate data collection, the DGDA, with the technical and financial support of the World Health Organization (WHO), has taken the initiative to develop a web portal specifically for the collection of Antimicrobial Consumption (AMC) data. Overall, GLASS-AMC, in collaboration with national entities like the DGDA in Bangladesh, plays a crucial role in enhancing understanding and addressing the global challenge of antimicrobial resistance. Through the standardized monitoring of antimicrobial consumption, countries can make informed decisions and implement targeted interventions to preserve the efficacy of these life-saving medications.



Meeting on development of AMC webportal

Global Summit Urges Stricter Control on Over-the-Counter Sales of Antibiotics

1st Global Joint Summit of Human and Veterinary Medicines Regulatory Authorities to Preserve Antimicrobials.

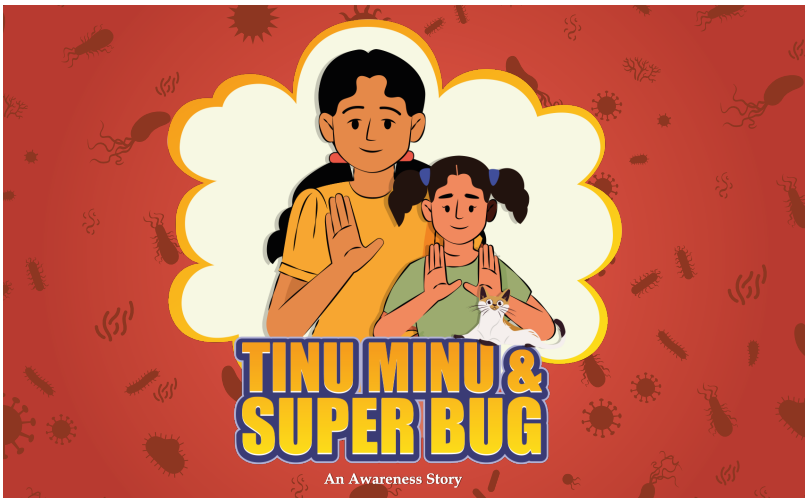
Geneva, Switzerland - In a landmark event that united regulatory authorities from across the globe, the 1st Global Joint Summit of Human and Veterinary Medicines Regulatory Authorities to Preserve Antimicrobials was held on May 4th-5th, 2023. The summit, focused on the theme of "Phasing out over-the-counter sales of antibiotics," aimed to emphasize the critical role of regulation in combating antimicrobial resistance (AMR) worldwide.

The summit brought together esteemed heads of regulatory authorities for human and animal medicines, as well as their designates, from diverse geographical regions. Their collective goal was to emphasize the importance of global regulation in addressing the escalating AMR crisis. By engaging human and animal regulatory authorities, the summit sought to optimize the use of existing legislation and enforcement measures, while also fostering the development of innovative, non-regulatory "Smart" solutions to tackle the pressing issue of over-the-counter sales of antibiotics.

Key participants in the summit included the Directorate General of Drug Administration (DGDA) of Bangladesh, which played an active role in sharing their experiences in regulating over-the-counter medicines. The DGDA introduced several groundbreaking ideas, such as the incorporation of a red label in the packaging of antibiotics. This visual cue serves as a reminder to healthcare professionals and consumers alike about the responsible use of antibiotics. Additionally, the DGDA emphasized the importance of robust law enforcement to ensure strict compliance and accountability in the distribution and sale of antibiotics.

The success of the 1st Global Joint Summit of Human and Veterinary Medicines Regulatory Authorities to Preserve Antimicrobials serves as a powerful testament to the importance of global collaboration in tackling the AMR crisis. Let us embrace the lessons learned and continue our collective journey toward a healthier, antimicrobial-resilient future.

World Health Organization | South-East Asia | Bangladesh



Antimicrobial Awareness Campaign reaches School in Bangladesh

7 March 2023, Bangladesh

World Health Organization (WHO) declared that Antimicrobial Resistance (AMR) is one of humanity's top 10 global public health threats. Although antimicrobial resistance emergence is a concern in all countries regardless of income level, Low and Middle-Income Countries (LMICs), which included Bangladesh, bear a heavier burden. Key factors contributing to AMR include:

- High level of antibiotic use and misuse.
- lack of access to clean water, sanitation and hygiene (WASH) for humans and animals.
- Access to quality, affordable medicine, vaccine & diagnostics.
- lack of awareness and knowledge about antibiotics.

Also, LMICs, especially those in Africa and Asia, need more robust antimicrobial resistance surveillance systems. Lack of appropriate laboratory facilities, gaps in quality assurance, skilled personnel, laboratory supplies, and management of lab services are major challenges in this surveillance.

Bangladesh celebrated World Antimicrobial Awareness Week, a global campaign held annually since 2015, to raise awareness of antimicrobial resistance worldwide and encourage best practices among the public, health workers, and policymakers to slow the development and spread of drug-resistant infections.
The Directorate General of Drug Administration (DGDA) and WHO Bangladesh initiated school activities to raise antimicrobial awareness among children. This included an art competition, comic book distribution among the students [Class 6 to Class 10], and a pillow passing game for teachers to make the audience understand the AMR with fun activities. Cox's Bazar Model High School undertook the pilot for the AMR awareness activities on 21 November 2022 followed by other popular schools in the capital like Viqarunnisa Noon School & College, on 1 February 2023.

In these art competitions, class six to ten students were briefed about antimicrobial resistance, its importance, and how it contributes in combating AMR. The comic books were distributed among 481 students, and 404 participated in the art competition. Through this campaign, the children were motivated and expressed their understanding of Antimicrobial Resistance (AMR) through their arts. The 9 art competition winners in Cox's Bazar Model High School got prizes and certificates from the District Controller (DC) and Director of DGDA on 22 November 2022. Later the winners of the campaign in Dhaka were also declared.

The AMR comic consisted of two parts. The first one is the story of two sisters: Tinu and Minu with Super bug. The story of Tinu and Minu conveys messages to stop antimicrobials resistance: medicines should be used correctly; take them only when prescribed by a registered physician; follow directions on treatment dosage and duration, even after the patient feels better; and don't share or use leftover antimicrobials to others.

The second part, "Thoughts of Tapa-Gopi," shows an earnest conversation between two chickens. The widespread use of antibiotics in agriculture and aquaculture has become another major factor driving antimicrobial resistance. The fast-growing demand for animal protein has increased the use of antimicrobials in the animal health sector. These drugs are used not only to treat and prevent infection but also to promote rapid growth. The antibiotic residue spreads into the soil and water from the animals' feces, which then helps antibiotic resistance to grow in nature.

Comics play pivotal role in engaging young students to communicate complex information on antimicrobial resistance in simple language. Through compelling storytelling and graphics, this method effectively raises awareness and promotes understanding of this important issue of antimicrobial resistance among the young students, the message will carry over to their families and promote awareness and health-consciousness around AMR.

https://www.who.int/bangladesh/news/detail/07-03-2023-antimicrobial-awareness-campaign-reaches-school-in-bangladesh/

World Health Organization | South-East Asia | Bangladesh

World Antimicrobial Awareness Week-2022:

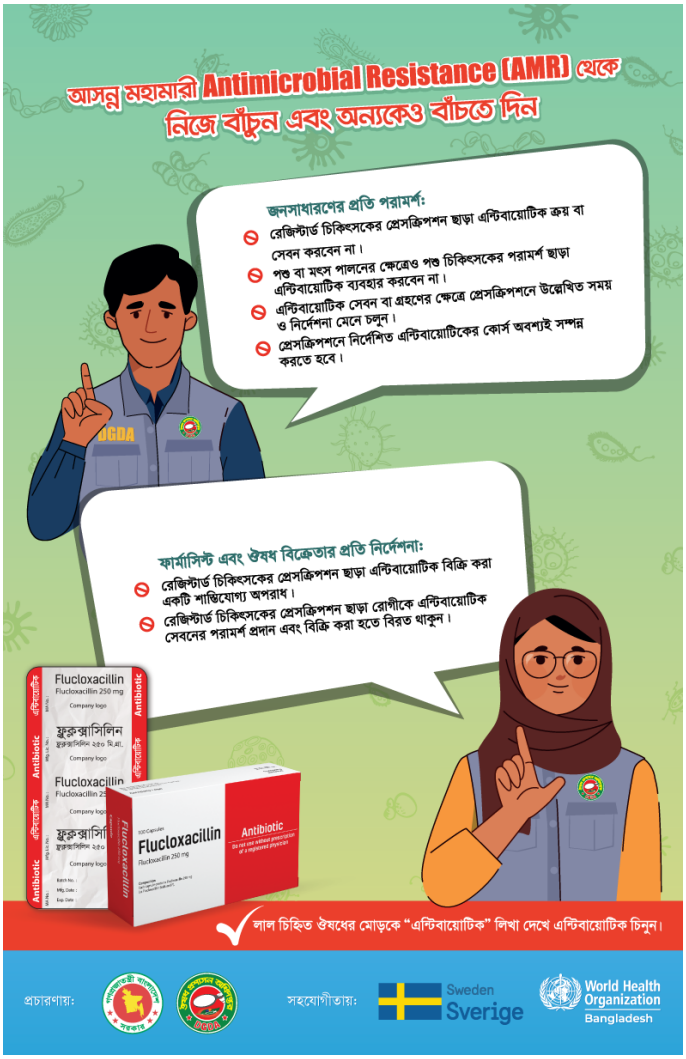
Activities of Directorate General of Drug Administration (DGDA)

18 November 2022, Bangladesh

To engage the policymakers and Govt relevant departments, the Directorate General of Drug Administration (DGDA) organized an AMR advocacy workshop and rally at the district level. The officials from the DGDA Head office, including the Director General, participated in the event. To understand and engage the audiences about AMR, posters and educational materials like comics book, presentations, etc., have been distributed among the guests.

In this World AMR Awareness week-2022, DGDA has declared their enrollment in GLASS-Antimicrobial Consumption (AMC) Surveillance, the 6 years (2015 to 2020) AMC report, the summary findings from AMC surveillance, and the regulatory decision to create public awareness through “Red Label” of antibiotic packaging concept and its implementation.

During the 2022 World Antimicrobial Awareness Week, DGDA and WHO Bangladesh launched a poster campaign for red labeling to stop antibiotic misuse/curbing self-medication. Along with the red-colored labeling, the DGDA made it imperative upon pharmaceutical companies to send a message to the public through the packaging that antibiotics could only be dispensed and sold when prescribed by registered physicians or registered veterinarians for human and animal use respectively. This is an effort to advocate for the rational use of antibiotics, promoting therapeutically sound and cost-effective treatments with antimicrobials prescribed by health professionals to patients.



High School received the comic book produced by DGDA. An art competition was organized with the topic, “Preventing Antimicrobial Resistance Together.” The students received one comic book on two different issues. The first is the story of two sisters, Tinu and Minu, and Superbug’s tale. The moral of the Tinu - Minu’s story is that antibiotics must be used as prescribed to prevent the emergence of antibiotic resistance. This means adhering to the prescribed dose and duration of treatment, even after the patient feels well, and not sharing or using leftover antimicrobials. The second one is a story about two chickens, Tapa and Gopi. Antibiotic overuse in livestock and aquaculture is now a significant factor in the emergence of antimicrobial resistance.

Given their durability, versatility, and capacity to convey complex information utilizing visual elements, comics are appropriate to raise awareness of antimicrobial resistance among Class 6 to Class 9 students, thus promoting awareness and health-conscious behaviors.

This antimicrobial awareness campaign project reached the school students with several IEC materials. On November 21, 2022, the student of class 6 to class 9 of Cox’s Bazar Model

https://www.who.int/bangladesh/news/detail/18-11-2022-world-antimicrobial-awareness-week-2022-activities-of-directorate-general-of-drug-administration

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Preventing Antimicrobial Resistance Together