



Dialogue on AMR and Italy's G7 Presidency

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BACKGROUND INFO

Antimicrobial resistance (AMR) is a global public health crisis with significant economic impacts. Drug-resistant bacterial infections already kill 1,27 million people every year globally (more than HIV/AIDS and malaria). Low- and middle-income countries (LMICs) account for nearly 90% of the direct death toll and over 99.5% of AMR-related deaths among children under five. Still, richer countries are also confronted with dreadful statistics: 11,000 Italians are estimated to die every year because of AMR (the largest number among all European countries).

The availability of effective antibiotics not only saves lives but also enables foundational practices of our societies and economies, from basic medical procedures to workers' productivity and stable food chains. This is why multiple reports have highlighted the significant public returns on potential public investments to stop superbugs. The Center for Global Development estimated that a new European-wide incentive program paying €150 million annually for an innovative antibiotic for ten years would save 385,000 lives and generate \$541 billion in total benefits for the EU over 30 years, for an ROI of 11:1. The OECD found that every €1 invested in a mixed policy package of AMR interventions across the health and food sectors generates returns equivalent to €5 in economic benefits achieved through reductions in health expenditure and increased productivity at work.

Against this background, political actions are not matching the urgency of the situation. Past political commitments to address AMR, including the 2016 Political Declaration of the High-Level Meeting on AMR at the United Nations General Assembly and 2023 EU Council Recommendation on Stepping up EU actions to Combat AMR in a One Health Approach, have represented important milestones in the global efforts to prioritize policy interventions against AMR. Moreover, recent G7 and G20 declarations have shown the existence of widespread consensus on the importance of supporting R&D, promoting prudent use, encouraging surveillance initiatives, as well as developing low- and middle-income countries' capabilities. Yet, there remains an urgent need for more effective and sustained action by governments alongside other stakeholders.

2024 is a special year for renewed and accelerated progress against AMR. Five key meetings will take place during the coming 12 months:

- Evidence for Action Dialogue on AMR in February in Malta,
- G7 Summit in June at Borgo Egnazia,

- UN High-Level Meeting (UN HLM) on AMR in New York in September,
- G7 Health Ministers' Meeting in October in Ancona, and
- 4th Ministerial Conference on AMR in November in Saudi Arabia.

Italy clearly has a crucial role as G7 Presidency to steer partners to implement impactful actions that accelerate, sustain, and track progress on AMR, in close collaboration with partners from the UN process leading to the HLM, the G20 and low- and middle-income countries.

Key areas for action include:

- **Increase investments in AMR innovation:** There is still a significant gap in public and private investments for better products that could prevent, diagnose and treat bacterial infections. Some G7 governments have done much to accelerate early-stage antibiotic R&D through novel 'push' mechanisms such as CARB-X. All G7 governments should now support 'push' mechanisms via direct funding, but also attract private investments via the implementation of national or regional 'pull' incentives (that is, sufficient financial rewards to incentivize R&D and market access). Investment in research capacity will also be critical as the AMR innovation ecosystem faces a shortage of experienced researchers with skills and knowledge in infectious diseases.
- **Implement stewardship while expanding access to treatments:** Antimicrobial treatments are frequently misused, notably due to a lack of awareness and the difficulty of putting comprehensive stewardship in place. The Italian G7 Presidency could establish concrete initiatives to safeguard international stewardship of antibiotics beyond the WHO's AWaRe antibiotic book for antimicrobial stewardship in hospitals. On the other hand, many countries and in particular LMICs have populations that lack access to basic, necessary antibiotics. Policy action is needed to improve access in an evidence-based way, focused on critical antibiotics in the most medically relevant situations.
- **Strengthen surveillance:** Ensuring effective surveillance systems is a challenge in both LMICs, where significant room for surveillance funding remains to improve capacity and capabilities, and HICs where the process for the selection of priority pathogens should be addressed. The G7 Presidency should commit to increased support to LMICs' health system capacity and integration of AMR control, including AMR surveillance.
- **Lead coordination and show accountability:** Progress in AMR has been too slow in the past years. Clear targets for national governments and the international community could raise ambition and drive sustained action. In its G7 Presidency, Italy could support bringing countries together to institutionalize stronger accountability and target-setting mechanisms, allowing progress in tackling AMR to be more transparently monitored. Leadership by the G7 on this topic in 2024 would be highly beneficial to discussions at UNGA in September where this issue is likely to feature prominently.