HEALTH POLICIES ON ANTIBIOTIC RESISTANCE IN ALBANIA

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Abstract

Policy-makers play a key role in tackling the emerging public health problem of antibiotic resistance. Antibiotic resistance is a result of the misuse, and especially the overuse, of antibiotics. Antibiotic resistance leads to excess morbidity and deaths. The problem is urgent. In the European Union more than 25 000 people die each year from common resistant bacterial infections. Owing to variable diagnostic capacity and a lack of data in countries, including Albania the number for the whole Region is not known. Antibiotic resistance increases health care costs. The estimated total cost to society of antibiotic resistance in the European Union alone is estimated to be € 1.5 billion. Resistant bacteria or genes that carry this information can spread easily. The use of antibiotics in animals sometimes outweighs their use in humans. Antibiotic resistance could take us back to the pre-antibiotic era. The complexity of the problem and the large number of sectors involved require strong national coordination, surveillance systems, national guidelines and sector-wide action plans. Based on good practices of national coordination of several European countries in many countries serve as reference in the conclusions to develop a strategic action plan by the Albanian health institutions that aim to:I. Strengthen national multisectoral coordination for the containment of antibiotic resistance. II. Strengthen national surveillance of antibiotic resistance. III. Promote national strategies for the rational use of antibiotics and strengthen national surveillance of antibiotic consumption. IV. Strengthen infection control and surveillance of antibiotic resistance in health care settings. V. Prevent and control the development and spread of antibiotic resistance in the food chain. VII. Improve awareness, patient safety and partnership. The complex nature of antibiotic resistance and the use of antibiotics requires the involvement of a wide array of actors.

Keywords: Health policies, Antibiotic resistance, Interagency coordination, Surveillance