

CHAIR REPORT

High Level Meeting “Antimicrobial Resistance: the way forward”

Bari, November 29th 2024

Embedded in the last G7 event of the health track of its Presidency, entitled “Antimicrobial Resistance: the way forward”, the Italian Ministry of Health hosted a high-level meeting, reserved to delegates of the G7 members, two invited countries, Albania and the Kingdom of Saudi Arabia, and three International Organizations, FAO, OECD and WHO. The meeting was chaired by Italy’s Undersecretary of State for Health, Hon. Marcello Gemmato.

The Presidency opened the meeting by highlighting the unprecedented political commitments on AMR, expressed during the most relevant events of the present year: the UN High-Level Meeting in New York, the G7 Ministerial Meeting in Ancona, the G20 Health Minister’s Meeting in Rio de Janeiro and the recent fourth High-Level Ministerial Conference in Jeddah.

The Undersecretary Hon. Gemmato highlighted the G7 Italian Government commitments to tackle the threat of AMR, including the allocation of 40 million euros for the implementation of the National Plan measures to tackle AMR and 21 million euro for the next 3 years in the field of push incentives through the public-private partnership Carb-X. Furthermore, it committed to incentivize the development of new antibiotics through governmental pull incentives mechanism. The need to keep the global momentum to discuss the way forward to coordinate efforts in addressing the growing threat of AMR, which remains one of the most pressing challenges to global health, was clearly expressed.

Before the tour de table, Hon. Gemmato invited selected keynote speakers.

Dr. Thanawat Tiensin, FAO Assistant Director-General, Director of the Animal Production and Health Division and Chief Veterinarian, discussed the critical intersections of food systems and antimicrobial resistance within the One health approach and, in particular, about the 10-year Global Initiative - Reduce the Need for Antimicrobials on Farms for Sustainable Agrifood Systems Transformation (‘RENOFARM’) and the International FAO AMR Monitoring System (InFARM). He mentioned FAO’s role in hosting the AMR Multi-Stakeholder Partnership Platform (MSPP) on behalf of the Quadripartite to harness global cross-sectoral collaboration using the One Health approach and exchange of best practices and the AMR Multi-Partner Trust Fund and Pandemic Fund among others as important instruments to catalyze sustainable and predictable funding to support NAPs implementation. He also announced the launch in 2025 of One Health & AMR Knowledge and Intelligence Hub for Agrifood Systems to mark FAO’s 80th anniversary.

Benedetta Allegranzi, Head of the Infection Prevention and Control Unit of WHO, and Michele Cecchini, principal administrator for public health of OECD, presented the key figures of a technical contribution, financed by the Italian Ministry of Health, on the cost-effectiveness and the return on investment of interventions to prevent infections and to tackle AMR. Building on what ECDC and other institutions showed, the majority of the burden of AMR is acquired in health care settings. New data from WHO and OECD estimated that in human health, prevention, through improved vaccination, WASH and infection prevention and control (IPC) in health care facilities, proves to be very effective in reducing deaths

associated with AMR (around 700,000 deaths averted every year in low- and middle-income countries). IPC is also the most cost-effective way to achieve both health and economic gains while reducing AMR (potential for avoiding 821,000 deaths due to health care-associated infections, saving USD 112 billion in healthcare expenditure and yielding USD 124 billion in economic gains, annually). The WHO global action plan and monitoring framework on IPC indicates actions and indicators to be adopted by countries to achieve the agreed upon targets by 2030 to reduce deaths and costs due to HAIs and AMR. Implementation of IPC is progressing slowly, with only 6% of countries fulfilling the WHO IPC minimum requirements. This is well behind the target of 80% by 2030 set in the WHO Global action plan and monitoring framework on IPC. Prioritizing prevention first and implementing these approaches is urgent and will directly and substantially contribute to achieving the UNGA target of reducing AMR related deaths by 10% by 2030.

Dr. Marta Caminiti, President of the European Member of Medical Residents in Public Health, presented the contribution of the WHO Youth Council in the contrast to AMR, established to amplify young voices in global health decisions, including AMR. In particular a Quadripartite Working Group on Youth Engagement for AMR has been organized that developed a Youth manifesto on AMR focusing on awareness-raising, capacity-building and interdisciplinary collaboration.

The statements provided by the G7 Members' Delegates in the tour the table commended the Italian Presidency for its commitment to address AMR, with Bari event serving as a key milestone in the global efforts to enhance international cooperation and action on this critical issue. Their interventions highlighted the strategies to be adopted to enhance economic investments, bolster international cooperation as well as the most appropriate policies to guide further progress to reduce the burden related to AMR. The need for a comprehensive involvement of all sectors of society, including governments, private sector, academia and civil society has been underlined with a focus on strengthened governance, accountability and targets. Members acknowledged the importance of establishing an Independent Panel on Evidence for Action Against AMR (IPEA), the need to strengthen the AMR Multi-Stakeholder Partnership Platform for the exchange of best practices, the Global AMR R&D Hub. The One Health approach, recognizing the interdependence of human, animal and environmental health, has been highlighted as a crucial one to effectively fight AMR. General agreement was expressed on the strategic role that will be played by research and innovation as well as incentives for the development of new antimicrobials. Additional international efforts on the need to further clarify priorities and demand dynamics to ensure alignment of incentives was acknowledged. There was also a clear call for continued reduction in the misuse of antibiotics, improvements in the field of infection prevention and control. Furthermore, consensus has been expressed also on the need for robust surveillance systems, improved diagnostics and timely access to new treatments. Finally, a unanimous concern has been expressed on the AMR-related inequalities, particularly in low- and middle-income countries.

During the Chair's conclusions, Hon. Gemmato expressed his gratitude to all the delegations for their productive collaboration throughout the G7 Italian Presidency and underscored the vital role of international cooperation in combating AMR. Hon. Gemmato also highlighted Italy's strategy, particularly under the Mattei's Plan for Africa, to address inequities in AMR by strengthening health systems and enhancing capacity building for pharmaceutical production and mentioned the WHO Academy in Lyon and the "Laboratorium", hosted at the Italian Institute for Health, that will be instrumental tools to improve training worldwide and foster collaboration among healthcare professionals and researchers.

In conclusion, the Italian Ministry of Health, as clearly stated by Minister Orazio Schillaci, will continue to do its part to reduce the impact of AMR with determination and responsibility to protect the health of our citizens and everyone in the rest of the world. G7 members must unite efforts to translate global commitments into actions. Partnership, innovation and One Health represent the solutions to trace the way forward. What we do today together ensures that there is a tomorrow where antibiotics still work.

Acknowledgements

Quadripartite, FAO, WHO, OECD, CARB-X, WHO Youth Network