



**Ministry of Health and Sanitation
Government of Sierra Leone**



CONDUCT OF POINT PREVALENCE SURVEY ON ANTIBIOTICS USE IN HOSPITALS

SIERRA LEONE'S EXPERIENCE

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National AMR Focal Person**

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Presentation outline



**WHAT WE
DID?**



WHY ?



HOW ?



SUMMARY

What we did...

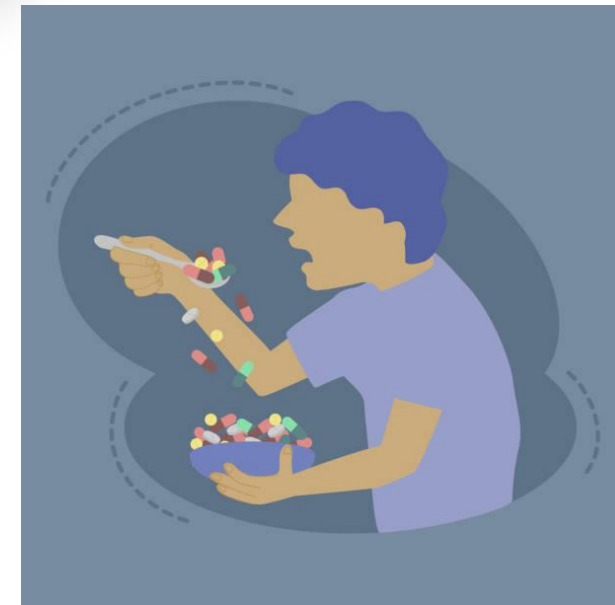
Conducted National Point
Prevalence Survey on antibiotic
use in hospitals

- 28 hospitals
 - 26 hospitals (2021)
 - 2 hospitals (2022)



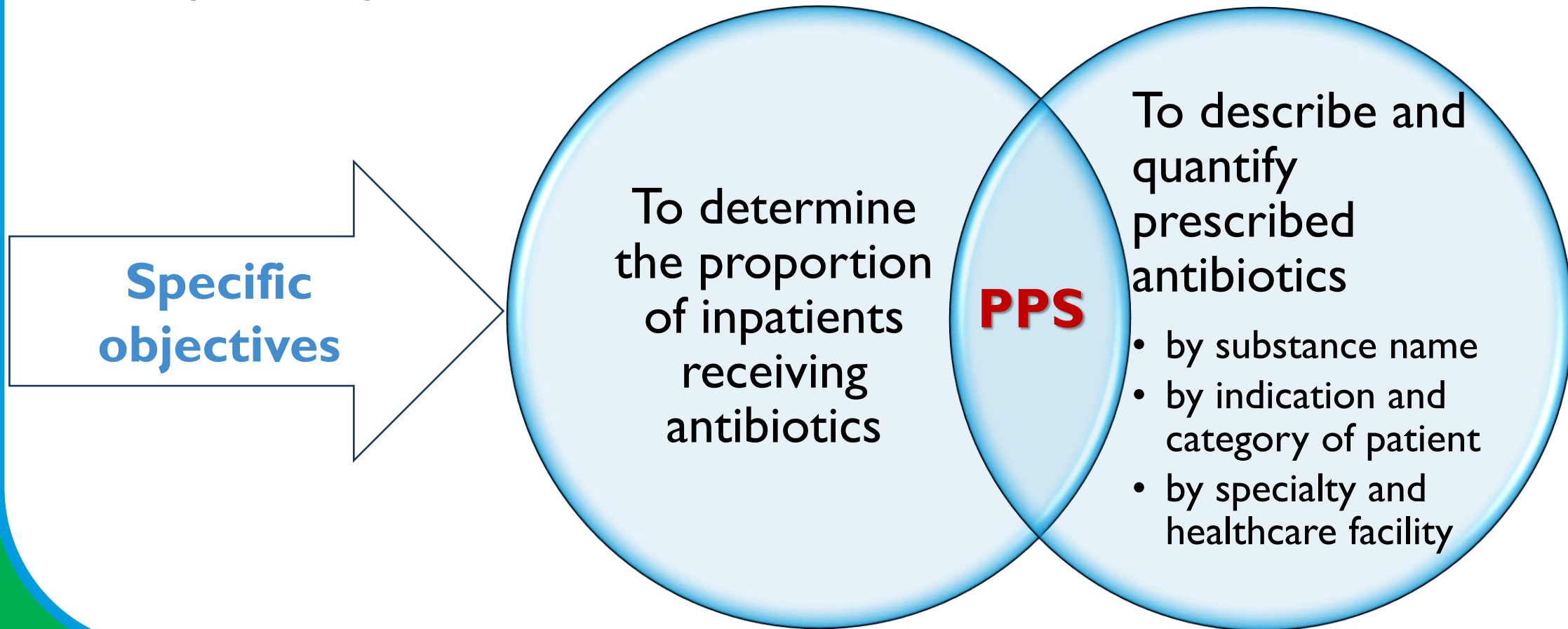
“Snapshot” of antibiotic
use at one point in time

Prevalence of antibiotic
use



Why did we do PPS...

Main Objective: to estimate the prevalence of antibiotic use in selected hospitals in order to inform interventions aimed at improving rational antibiotic use



Why did we do PPS...

To improve the appropriate use of antibiotics...

Understand the situation

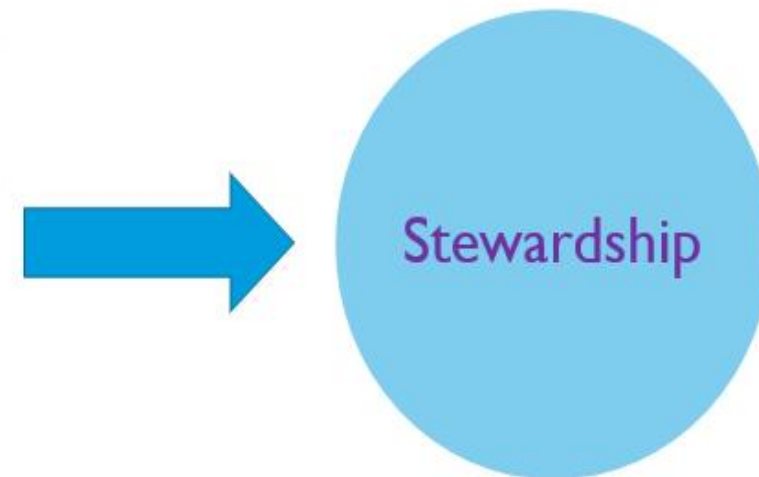


Baseline

Intervene & evaluate



Follow-up



Why did we do PPS...

Optimize the use of antimicrobials along the Product value chain



How?...

Using WHO PPS Methodology

Sites Selections

- Stratified random sampling (33 HFs) and convenient sampling (2 HFs)
- 33 hospitals selected (based on *DPPI facility list*) (2021)
 - 26 included in survey
 - 6 facilities were non-respondent
 - 1 hospital excluded -> No hospitalized patients at the time of the survey
- Additional 2 included – Fleming Fund supported-sites (2022)

Survey implementation

- From September 2021 to June 2022
- Surveys conducted by one national team
- Data collected on paper-based forms and entered in the WHO PPS platform

WHO Methodology for Point Prevalence Survey on Antibiotic Use in Hospitals

Version 1.1



How?...

Phase 1

Coordination & Planning

- Identified national coordinator and team
- Selected hospitals
- Sought buy-in from hospital management and staff
- *Formally informed facility managers*
- Sought ethical clearance
- Trained personnel
- Prepared all materials
- Set timelines

Phase 2

The Survey

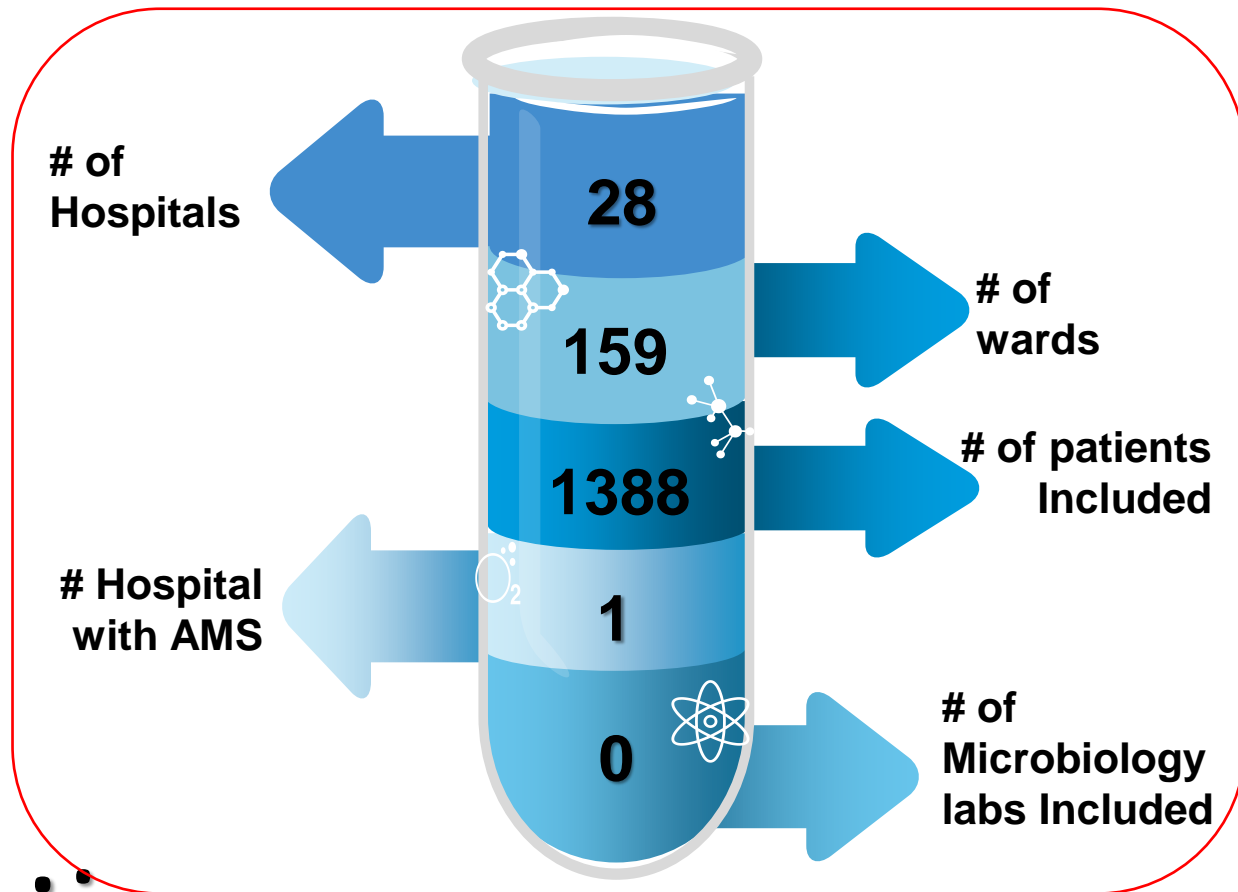
- Provide logistics
- Collected data
- Data entry

Phase 3

Analysis and reporting

- Data cleaning
- Data analysis
- Report writing
- Dissemination of preliminary results

Summary Results – Hospitals Overview



Type of hospital	N (%)
Primary	12 (43%)
Secondary	14 (50%)
Tertiary	2 (7%)

Hospital ownership	N = 28 (%)
public	14 (50%)
private, not-for-profit	10 (36%)
private, for-profit	4 (14%)

Included patients	N = 1388
Median by hospital (range)	41 (1-180)

Results: Patients' characteristics

Age and gender

Patients **N = 1388**

Age

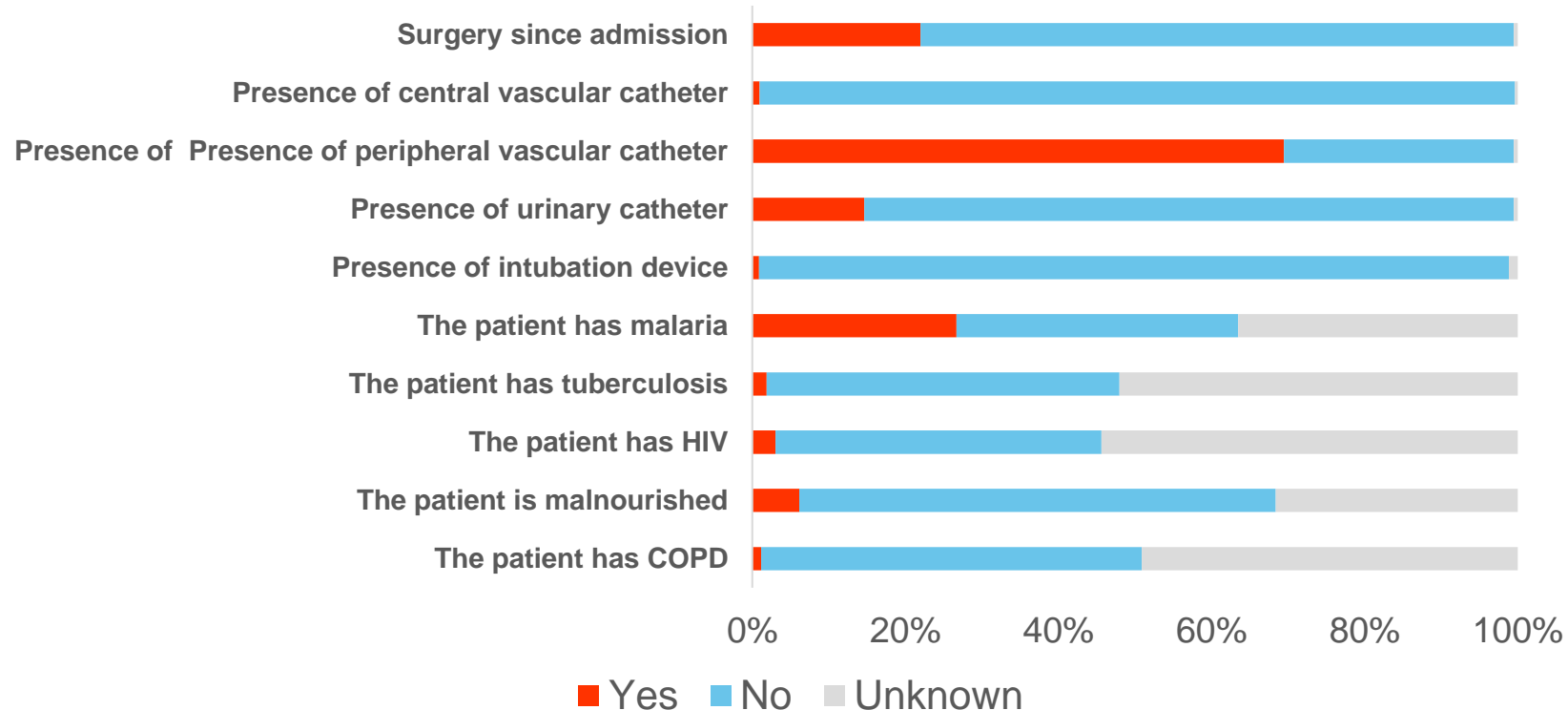
Median (range) **20 (1-97)**

Under 5 (<5)	488 (35.2%)
Children (5-14)	84 (6.1%)
Youths (15-24)	218 (15.7%)
Adults (25-64)	464 (33.4%)
Above 65 (>65)	79 (5.7%)
UNK	55 (4.0%)

Gender

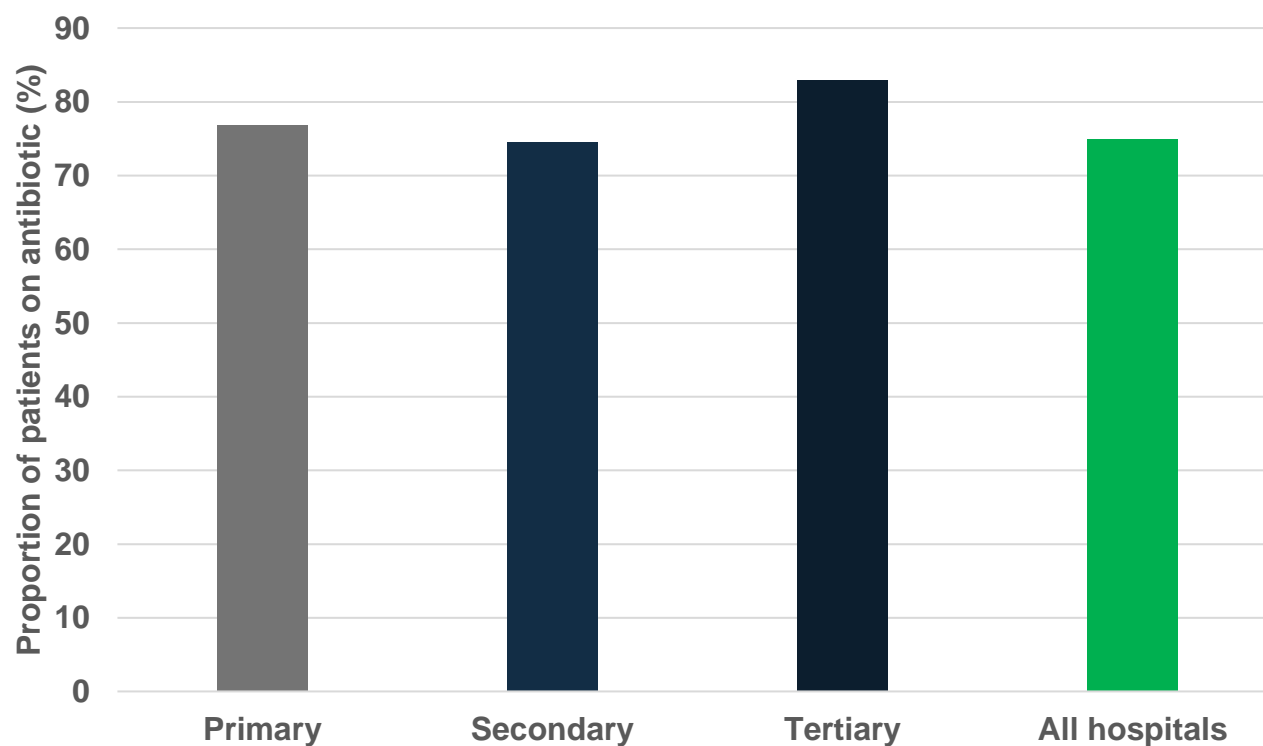
Female	835 (60.2%)
Male	550 (39.6%)
Unknown	3 (0.2%)

Risk factors / comorbidities (N= 1388)



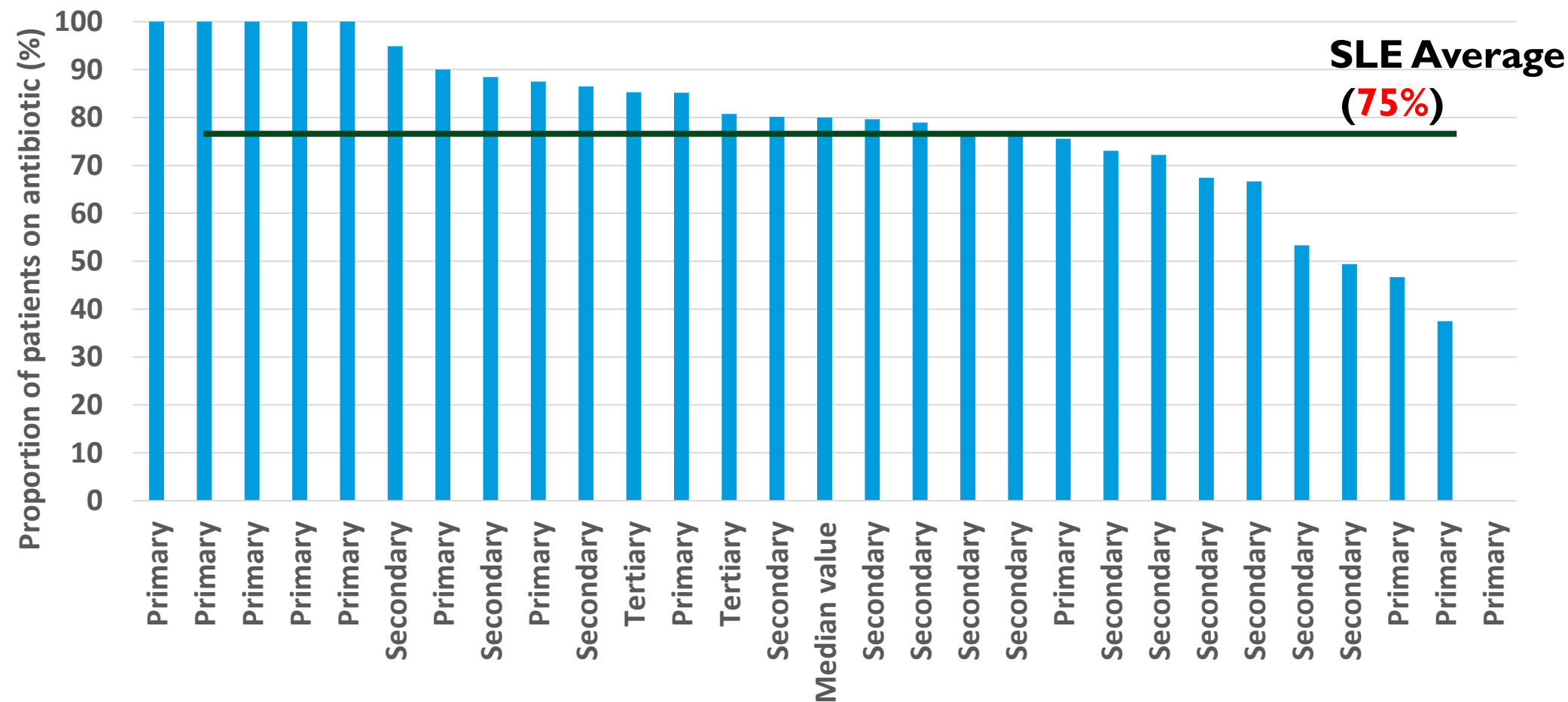
Results: Prevalence of patient on antibiotic therapy

Prevalence of patient on antibiotics by types of hospital



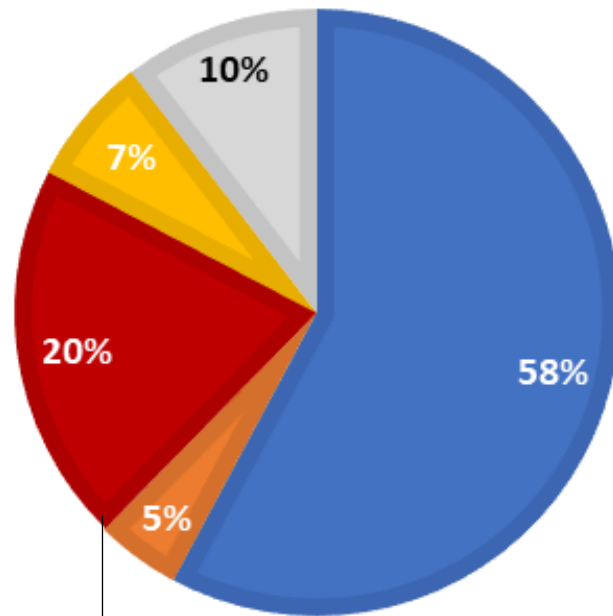
- Of 1388 included patients, **1040 patients were on antibacterial therapy** at the time of the survey
 - **Overall, AMU prevalence = 75%**
- 747 (54%) patients were receiving more than one antibiotic

Results: Prevalence of patient on antibiotic therapy by hospital



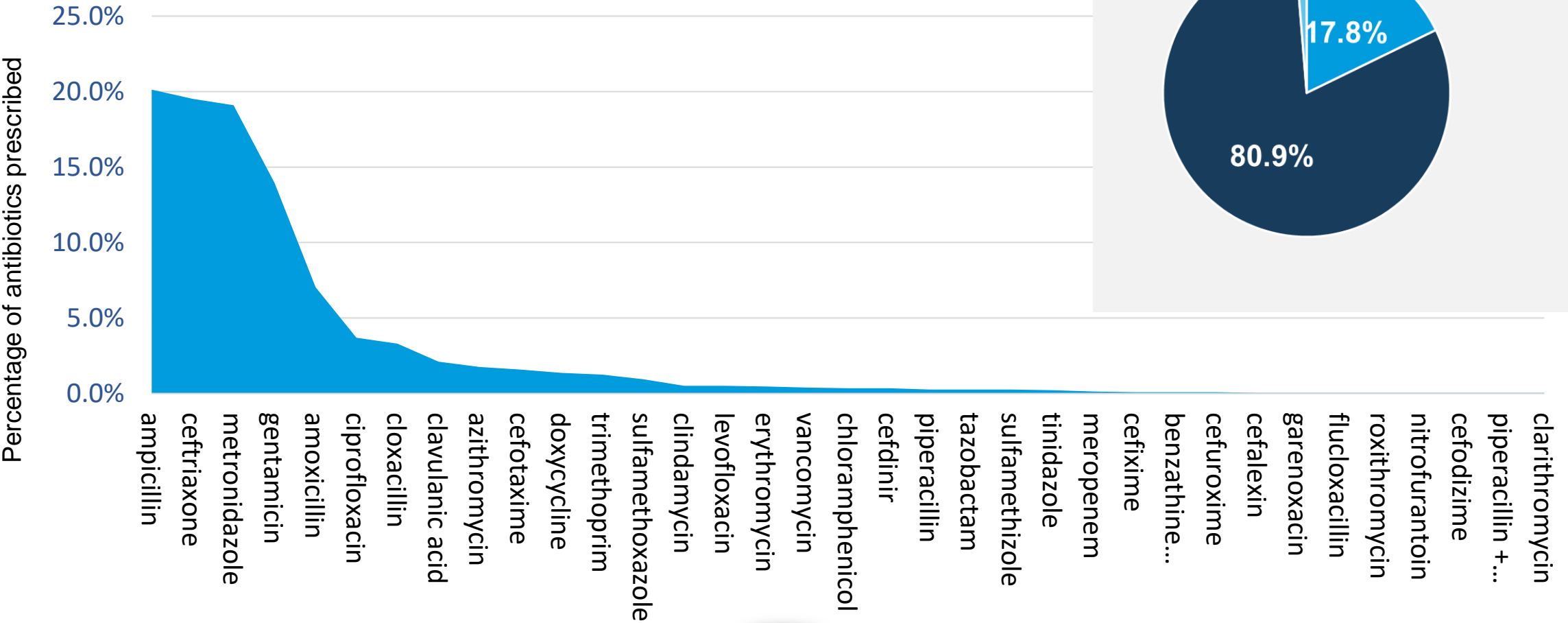
Results: Indication type

- Community acquired infection
- Hospital aquired infection
- Surgical profilaxis
- Medical profilaxis
- Other / Unkown

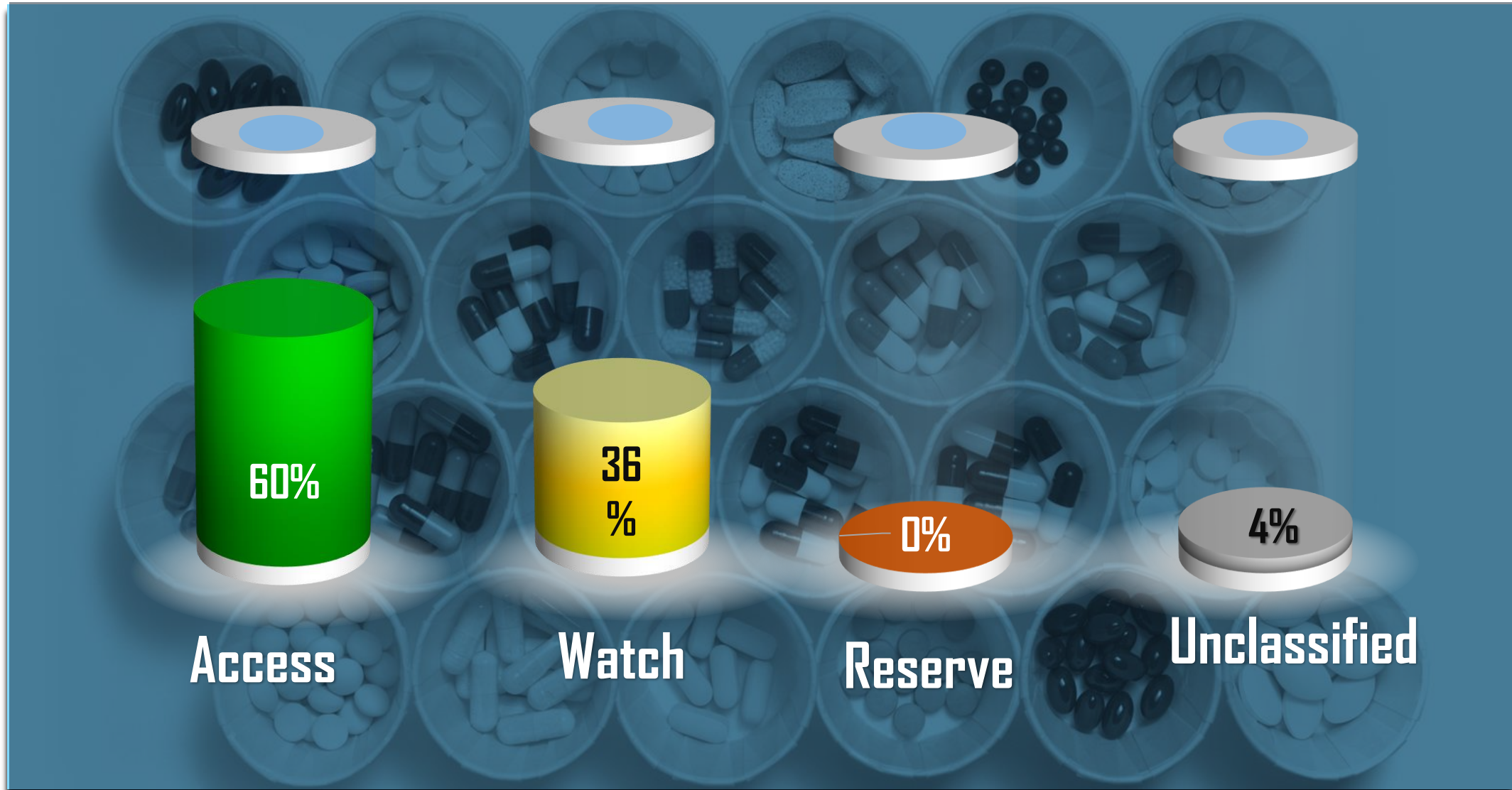


Daignosis	N=680	%
Pneumonia	200	29
Unknown	114	17
Gastrointestinal infections	71	10
Cellulitis, wound, deep soft tissue	57	8
Sexually transmitted disease	51	8
Clinical sepsis	46	7
Obstetric or gynaecological infections	23	3
Acute bronchitis	22	3
Infections of the central nervous system	19	3
Septic arthritis, osteomyelitis	13	2
Symptomatic lower urinary tract infection	10	1
Other	54	8

Results: Antibiotics prescribed



Results: Antibiotic Use by AWARe categorization



Conclusion

- ❑ High prevalence of antibiotic use in hospitals in Sierra Leone
- ❑ Majority of the antibiotics prescribed fall under the “ACCESS” group
- ❑ Frequently prescribed antibiotics are: ampicillin, ceftriaxone, metronidazole, gentamicin, and amoxicillin
- ❑ High proportion of parenteral antibiotics
- ❑ Empirical treatment is the mainstay

Implication for AMR

- ❑ **Overuse of antibiotics** in hospitals in Sierra Leone
 - ❑ Possibly a key driver of AMR in Sierra Leone
- ❑ AMR Stewardship program needed
 - ❑ Secondary and tertiary healthcare facilities
 - ❑ Include microbiology capacities and IPC

Acknowledgement

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MOTT
MACDONALD



Tenki!
Thanks!

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