B|BRAUN
SHARING EXPERTISE

ABOUT ANTIMICROBIAL RESISTANCE

WHAT IS ANTIMICROBIAL RESISTANCE (AMR)?

SELECTIVE ANTIMCROBIALS?
Substances with a selective mode of action (e.g. enzyme inhibition) used to treat a wide variety of infectious diseases in humans and animals. They:
- Kill micro-organisms
- Stop micro-organisms from growing and multiplying

Example: systemic and local antibiotics

ANTIMICROBIAL RESISTANCE?
The ability of micro-organisms to with-stand antimicrobial treatments.

Antibiotic resistances transmitted via plasmides are passed down through generations.

WHY IS RESISTANCE GROWING?
- Overuse of antibiotics
- Misuse of antibiotics
- Spread through various routes

EFFECT OF GROWING RESISTANCE?
- Treatment may become ineffective
- Serious risk to public health

FACTS

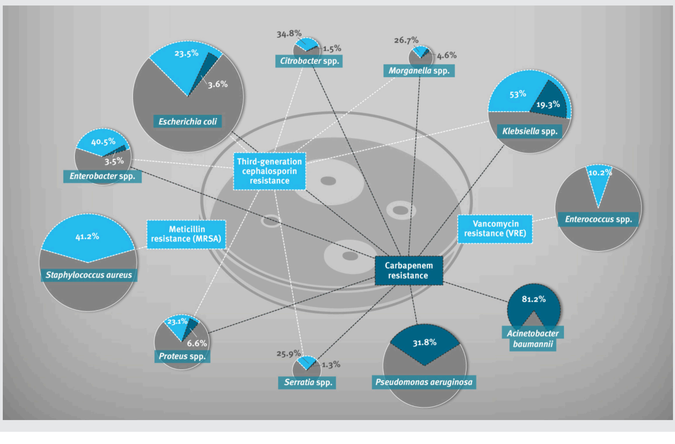
ANTIMICROBIAL RESISTANCE IS A
SERIOUS THREAT
TO PUBLIC HEALTH IN EUROPE.[2]

68 %
OF ANTIMICROBIALS ARE PRESCRIBED FOR TREATMENT OF AN INFECTION[1]

STUDIES SHOW
POSITIVE
CORRELATION BETWEEN HAND HYGIENE COMPLIANCE IMPROVEMENT AND DECREASE OF MULTIDRUG RESISTANT ORGANISMS[3]

RESISTANT MICROORGANISMS

Percentage of antimicrobial resistance of most frequent microorganisms that cause health-care acquired infections

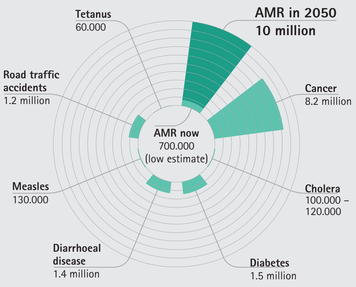


[11]

ACTION REQUIRED

Antimicrobial resistance continues to rise as a major cause of death[4]. Prudent antimicrobial use and comprehensive infection prevention and control strategies targeting all healthcare sectors need to be implemented[2].

Continued rise in resistance by 2050 would lead to 10 million people dying every year and a reduction of 2 % to 3.5 % in Gross Domestic Product (GDP). It would cost the world up to 100 trillion USD.



PREVENT INFECTIONS – FIGHT AMR

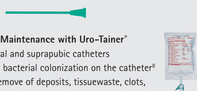
Surface Disinfection with Meliseptol®
CDC[5] named surface disinfection as a major accompaining method for the abatement of transmission of multidrug-resistant organisms MDRO. Without a sufficient disinfection of all frequently-touched surfaces (bedrails, charts, bedside tables, doorknobs and light switchers), MDRO can spread and increases the risk of unforced infections. Available as solution and ready-to-use wipes.

Decolonization with Prontoderm®
- Bactericidal efficacy for MRSA, ESBL / ESCR and VRE proven by EN13727
- Proven antimicrobial barrier effect for up to 24 hours[7]
- Does not have to be washed off
- Outstanding skin tolerance, dermatologically tested
- Available as solution, wipes, nasal gel, hair foam, shower gel and mouth rinse solution

B. BRAUN AGAINST AMR

Hand Hygiene with Softa-Man® / Softalind®
Most MDROs are spread via simple hand contact. Knowing that only 61 % of health-care professionals do not clean their hands correctly makes hand hygiene even more important.[6]

Wound Cleansing with Prontosan®
- Prevents infection
- Helps prevent biofilm formation[10]
- Reduces healing time[10]
- Gentle dressing change
- Available as solution, low and high-viscosity gel



Catheter Maintenance with Uro-Tainer®
For urethral and suprapubic catheters
- Reduces bacterial colonization on the catheter[8]
- Aid to remove of deposits, tissuewaste, clots, and mucous[9]

Source
1: ecdc. 2012. Point prevalence survey (PPS) on healthcare-associated infections (HAIs) and antimicrobial use in European hospitals. http://ecdc.europa.eu/en/healthtopics/Healthcare-associated_infections/point-prevalence-survey/PublishingImages/hai-point-prevalence-survey.jpg (accessed: 02.02.2017)
2: European Centre for Disease Prevention and Control. Antimicrobial resistance surveillance in Europe 2015. Annual Report of the European Antimicrobial Resistance Surveillance Network (EARS-Net). Stockholm: ECDC; 2017.
3: WHO. http://www.who.int/gpsc/5may/MDRO_literature-review.pdf?ua=1 (accessed: 01.02.2016)
4: AMR review. Antimicrobial Resistance: Tackling a crisis for the health and wealth of nations Chaired by Jim O'Neill. December 2014Igenis etus dolent aliquate res net
5: http://www.cdc.gov/hicpac/mdro/mdro_4.html (accessed 25 Oct 2016)
6: WHO; Presentation: WHO_Facts_DRT661;_Health-Care Associated Infection and Hand Hygiene Improvement – Slides for the Hand Hygiene Co-ordinator", under http://www.who.int (accessed 2 May 2016)
7: Internal in Vitro Test - F.Brill 2008 - Data on File
8: Brill FHH. Phase II, step II in vitro study – Decolonization potential of Uro-Tainer Polihexanide 0.02% polihexanide in direct comparison to Uro-Tainer NaCl under practice conditions. Test report no. P10/053.2.
9: Brill FHH & Arndt A. Decolonisation potential of Uro-Tainer Polihexanide vs. Uro-Tainer NaCl measured by fluorescent microscopy. Data on file October 2014.
10: Perez R, Davies SC, Kaehn K., Effect of different wound rinsing solutions on MRSA biofilm in a porcine model. WundM 2010;4(2):44 – 48.
11: ecdc. 2012. Point prevalence survey (PPS) on healthcare-associated infections (HAIs) and antimicrobial use in European hospitals. http://ecdc.europa.eu/en/healthtopics/Healthcare-associated_infections/point-prevalence-survey/PublishingImages/hai-point-prevalence-survey.jpg (accessed: 02.02.2017)

B. Braun Medical AG | Infection Control | Seesatz | 6204 Sempach | Switzerland
www.bbraun.com | www.bbraun.com/infection-prevention

E7210_3003_JF2019