



The Royal Australasian  
College of Physicians

From the President

10 April 2013

Standing Committee on Finance and Public Administration  
GPO Box 6100  
Canberra ACT 2600

Dear Dr Bell

**Inquiry into the progress in the implementation of the recommendations of the 1999 Joint Expert Technical Advisory Committee on Antibiotic Resistance (JETACAR)**

The Royal Australasian College of Physicians (RACP) welcomes the invitation to provide a submission to the Standing Committee on Finance and Public Administration (FPA) on antimicrobial resistance (AMR).

The RACP supports both the submissions provided by the Australian Society for Infectious Diseases (ASID) and the Australian Society for Antimicrobials (ASA). The two societies, ASID and ASA, convened the AMR Summit in Sydney in February 2011<sup>1</sup>. The aim of the Summit was to identify gaps in the first JETACAR report, and to help determine future strategies for control of AMR.

The RACP including ASID<sup>2</sup> and ASA shares the general concern that antibiotic resistant bacteria are becoming a major public health problem worldwide, including Australia.

The RACP commends the establishment of the Antimicrobial Resistance Standing Committee (AMRSC) of the Australian Health Protection Principal Committee to lead comprehensive resistance surveillance firstly in human health followed later by veterinary and agricultural use. This AMRSC includes multiple stakeholders with representation from professional associations, the Public Health Local Networks (including reference laboratories), Communicable Diseases Network Australia, the Therapeutic Goods Administration (TGA), the National Health and Medical Research Council, the Pharmaceutical Benefits Scheme, the National Prescribing Service,

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<sup>1</sup> Gottlieb T, et al; Infectious Diseases in Australia, MJA 2012 196, 292-293

Australian Pesticides and Veterinary Medicines Authority, as well as State and Territories Health departments.

The Australian Commission on Safety and Quality in Healthcare (ACSQHC) has also been pivotal at implementing improved national infection control programs and now mandates accreditation standards in all healthcare facilities. To achieve hospital accreditation ACSQHC mandates antibiotic stewardship as a major part of each hospital infection program.

A number of JETACAR recommendations were only partially or not addressed. The RACP supports a co-ordinated national approach, involving all the key stakeholders and using the framework of the JETACAR report to address the implementation of the JETACAR recommendations.

Specifically, the RACP recommends continued funding of AMRSC in order to:

1. coordinate and implement a comprehensive national plan to address antimicrobial resistance
2. conduct further research into the epidemiology of antibiotic resistant organisms
3. establish best-practice control and infection prevention interventions and avoidance of patient contamination in hospitals and other healthcare settings particularly in vulnerable populations such as paediatric patients, residents of aged care facilities; indigenous peoples; and travellers
4. develop public health policies to link patient care sectors and public health.

Furthermore, the RACP supports that:

5. the antibiotic stewardship program continues to be implemented and supported in all hospitals
6. a uniform national medical curriculum is implemented and monitored in Australasia to ensure that prescribers use the narrowest spectrum single antibiotic at appropriate doses and duration to treat the likely pathogen, as recommended by local guidelines and pathology providers.
7. the TGA regulatory system applying to antibiotics is reviewed and upgraded at least every two years.

The RACP looks forward to the outcomes of the FPA enquiry on AMR and would welcome the opportunity to work with the FPA on the project's next steps. Should you

Yours sincerely

Prof Nicholas J Talley  
President-Elect and Acting President