

EXPRESS VIEW ON ANTIBIOTICS: THE RIGHT TREATMENT

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

The Centre has done the right thing in asking doctors to be more responsible when they prescribe antibiotics. The Union Health Ministry has asked physicians to write down the exact reasons for advising patients to use these medicines. It has also asked pharmacists to not dispense antimicrobials without a prescription. The country has had a policy to prevent the overuse of antibiotics for close to a decade. However, the use of such medicines is still not monitored by the government. A Lancet study in 2022 noted that “India consumes a large volume of broad-spectrum antibiotics that should ideally be used sparingly”. Antibiotic overuse is the primary reason for bugs developing resistance to these medicines. That is why patients with severe diseases like tuberculosis are increasingly not responding to the first line of treatment.

Broad-spectrum antibiotics target a wide variety of bacteria and are antidotes to serious infections. However, anecdotal evidence shows that doctors tend to err on the side of caution and prescribe these medicines without diagnosing whether an infection is viral or bacterial. They also advise antibiotics to prevent secondary infections even when the threat of such a malady is remote.

Individual doctors, though, are only one part of the problem. Medical protocols require hospitals to have a policy for rational use of antibiotics — this is important because studies show that these healthcare facilities are major breeding grounds for antimicrobial resistance. But only a few big hospitals follow this mandate.

A recent study by the National Centre for Disease Control revealed that three out of four patients who went to a tertiary care centre were prescribed an antibiotic, often to prevent an infection rather than to cure it. The study conducted between November 2021 and April 2022 under the National Programme of Antimicrobial Containment found only a 10 percentage point difference in antibiotic use between intensive care units that have the sickest patients and the other wards.

Given the heterogeneity of the country’s healthcare settings, a one-size-fits-all approach might not be apt to regulate antibiotic use. In 2013, the [Chennai](#) Declaration by a group of concerned doctors suggested strict control of the use of such medicines in areas with relatively well-provisioned medical facilities and a more liberal system based on the strict monitoring of select oral antimicrobials in other areas. Another school of experts believes that medical experts must create more awareness within their community. Some others advocate that healthcare centres must have more microbiologists to guide doctors. The government’s nudge to doctors should spur such conversations. The medical community must now step in to tackle the problem in all its dimensions.

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