

Pill talk — On antibiotic resistance

Around the time the UN Climate Change Conference drew to a close in Bonn last week, so did the World Antibiotic Awareness Week, a World Health Organisation campaign to focus attention on antibiotic resistance. The global threats of climate change and antibiotic resistance have much in common. In both cases, the actions of people in one region have consequences across the globe. Also, tackling both requires collective action across multiple focus areas. For resistance, this means cutting the misuse of antibiotics in humans and farm animals, fighting environmental pollution, improving infection control in hospitals, and boosting surveillance. While most of these goals need government intervention, individuals have a critical part to play too. This is especially true for India, which faces a unique predicament when it comes to restricting the sale of antibiotics — some Indians use too few antibiotics, while others use too many. Many of the 410,000 Indian children who die of pneumonia each year do not get the antibiotics they need, while others misuse drugs, buying them without prescription and taking them for viral illnesses like influenza. Sometimes this irrational use is driven by quacks. But just as often, qualified doctors add to the problem by yielding to pressure from patients or drug-makers. This tussle — between increasing antibiotic use among those who really need them, and decreasing misuse among the irresponsible — has kept India from imposing blanket bans on the non-prescription sale of these drugs.

When policymakers did propose such a ban in 2011, it was met with strong opposition. Instead, India turned to fine-edged tools such as the Schedule H1, a list of 24 critical antibiotics such as cephalosporins and carbapenems, whose sale is tightly controlled. But even Schedule H1 hasn't accomplished much: pharmacists often flout rules, and drug controllers are unable to monitor them. Thus, the power to purchase antibiotics still remains in the hands of the consumer. It is up to consumers now to appreciate the threat of antibiotic resistance and exercise this power with care. These miracle drugs form the bedrock of modern medicine today, and are needed for everything from prophylaxis for a complicated hip surgery to treatment for an infected knee scrape. Losing these drugs would mean that even minor illnesses could become killers, and the cost of health care will soar. Consumers need to remember that not all illnesses need antibiotics, and the decision on when to take them and for how long is best left to a doctor. Multi-resistance in some tertiary-care hospitals to bugs like *Staphylococcus aureus* has grown to dangerous levels. But the experience of countries like Australia shows that cutting down on antibiotics can reverse such trends. The National Action Plan on Antimicrobial Resistance aims to repeat such successes in India. Meanwhile, awareness must be built among consumers so that they see the coming crisis and take up the baton.

Revving up infrastructure spending is necessary, but not sufficient

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