

CARPHA STRATEGIES AND PROGRAMMATIC WORK



Strategic Priorities

Integrated Surveillance Strategy

Programmatic Work

- Regional Public health agency serving 29 member states.
- AMR work fall under
- **S.P.2.2** CMS enabled to prevent, respond and manage public health through a coordinated approach to implementation of the Global Health Security Agenda (GHSA) Roadmap for the Caribbean Region.
- S.P.4.5 Increased availability of strategic information, through research and data management, to inform health policy and programmes in Member States

CARPHA Medical Microbiology Laboratory (CMML)

- > Regional Reference and referral testing accredited lab
- ➤ Testing services provided to 26 CMS through National Public Health Laboratories (Vaccine Preventable, Respiratory, Vector borne and Foodborne Diseases) including
 - Whole Genome Sequencing
 - Virus Isolation
 - > AMR



Status of AMR activities in Caribbean

- CARPHA, Hospital and Public health laboratories in many countries conduct AMR testing on ad hoc basis:
 - Hospitals: mainly non- enterics
 - Public Health Laboratories: mainly enterics (Salmonella & Shigella)
- No regional established AMR surveillance program
- No routine data collection, reporting & analyses
- Surveys (2009, 2013, 2022)13-15 CMCs conduct ad hoc AMR testing
- Pathogens AMR tests performed on
 - Enterics (previously)
 - Salmonella, Shigella,
 - Non Enterics
 - Streptococcus pneumoniae & Haemophilus influenzae
 - Neisseriae gonorrhoea
 - Carlon RSA, ESBLs
 Agency



Timeline 2014-2022

CARPHA and Public **Health England Tackle** the Threat of **Antimicrobial Drug** Resistance

• 2014

Establishment of a regional reference service to provide reliable automated antimicrobial susceptibility data for the Caribbean: System description and early findings

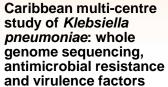
• 2017-2019

WAAW Lets Unite to Preserve Antimicrobials

• 2020



• 2016-2018

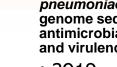


• 2019

Antimicrobial Resistance in the Caribbean

• 2022

COVID-19 Pandemic

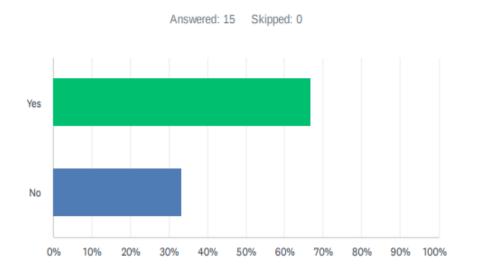




Preventing disease, promoting and protecting health

Regional survey, July 2022

Q10 Is your laboratory able to conduct AMR testing and reporting?



ANSWER CHOICES	RESPONSES	RESPONSES	
Yes	66.67%	10	
No	33 33%	5	

Total Respondents: 15



Anguilla
Barbados
Bahamas
Belize
Bermuda
Cayman Islands
Grenada
Jamaica
Saint Lucia
Saint Vincent and the
Grenadines
Trinidad and Tobago
Turks and Caicos

	2018-2020	2021-Present
TAT	7-14 days	2-7days
Sample Throughput	30 (-18hrs)	192 (-1hr)
Number of Organisms	1000+	3000+
AMR Resistance Profile	CLSI Update 2018	CLSI Update 2021



Preventing disease, promoting and proted

AMR SURVEILLANCE is part of Integrated Foodborne disease surveillance at CARPHA

- CARPHA: promoting the one health integrated approach, integrating epi, lab, env health and and vert aspects of FBD surveillant since 2005
- CARPHA &PAHO: multiple regional cross-cutting workshops on integrative FBD & AMR
- Step-wise training of Caribbean countries in food safety with PAHO.
- Provisions of molecular testing for foodborne pathogen genotyping.
- Stakeholder mtgs to design and implement National Action Plans to address AMR.
- Governments and CARICOM Secretariat: collaboration between public health, laboratory, medicine, pharmacology, veterinary medicine, policy and agriculture.
- Countries are addressing gaps in their laboratory capacity and surveillance systems, to incorporate AMR genotyping and sequencing.
- Countries are developing Plans of Action for Treatments to comprehensively address drug resistance in HIV, Vector-borne diseases and foodborne disease bacteria

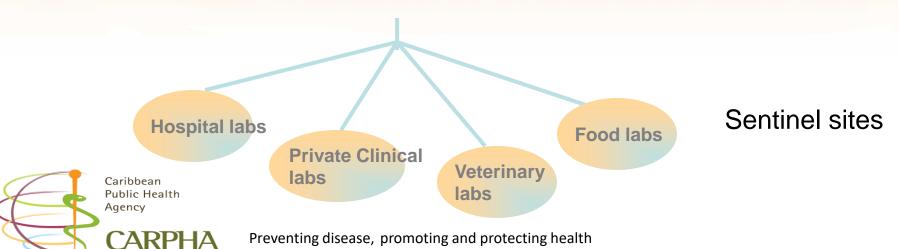


Public Health

Proposed Integrated AMR surveillance



National Coordinating Center



Challenges

- Political will support
- · Coordination, Communication, data sharing
- Sectoral and agency integration
- Funding & HR
- Prioritization of AMR
- Data on impact and burden
- Establishing regional AMR surveillance

