ISLAMABAD - Drug resistance is becoming more severe and many infections are no longer easily cured, leading to prolonged and expensive treatment and greater risk of death, warns the World Health Organization (WHO) on World Health Day. This day is celebrated every year on the 7th April to mark the establishment of WHO on that day in 1948. Under the theme "Combat Drug Resistance", WHO has called for urgent and concerted action by governments, health professionals, industry and civil society and patients to slow down the spread of drug resistance, limit its impact today and preserve medical advances for future generations. "The message on this World Health Day is loud and clear. The world is on the brink of losing these miracle cures," said WHO Director-General Dr Margaret Chan. "In the absence of urgent corrective and protective actions, the world is heading towards a post-antibiotic era, in which many common infections will no longer have a cure and, once again, kill unabated." The discovery and use of antimicrobial drugs to treat diseases such as leprosy, tuberculosis, gonorrhea and syphilis changed the course of medical – and human - history. Now, those discoveries and the generations of drugs that followed them are at risk, as high levels of drug resistance threaten their effectiveness.

Last year, at least 440,000 new cases of multidrug resistant-tuberculosis were detected and extensively drug-resistant tuberculosis has been reported in 69 countries to date. The malaria parasite is acquiring resistance to even the latest generation of medicines, and resistant strains causing gonorrhea and shigella are limiting treatment options. Serious infections acquired in hospitals can become fatal because they are so difficult to treat and drug-resistant strains of microorganism are spread from one geographical location to another in today's interconnected and globalized world. Resistance is also emerging to the antiretroviral medicines used to treat people living with HIV.

"On this World Health Day, WHO is issuing a policy package to get everyone, especially governments and their drug regulatory systems, on the right track, with the right measures, quickly," said Dr Chan. "The trends are clear and ominous. No action today means no cure tomorrow. At a time of multiple calamities in the world, we cannot allow the loss of essential medicines – essential cures for many millions of people – to become the next global crisis."

In his message on the occasion Dr Hussein A. Gezairy WHO Regional Director for the Eastern Mediterranean has stressed that the period exceeding six decades since the establishment of WHO has witnessed key improvements in the control of diseases by antimicrobials. However, we are seeing now a decline in the cure rates of diseases due to the development of resistance by all kinds of microorganisms including bacteria, viruses and parasites resulting in a weakening of the response of antimicrobials and, consequently, reduction in their effect. He has warned that this situation threatens to return the world to the era before the discovery of the medicines

that are so essential in controlling infectious diseases, the heavy burden of which needs to be addressed urgently.

Dr Gezairy has emphasized that the WHO and its partners from regional countries have a responsibility to support the scientific progress made in medicines manufacturing technology through adopting best practices to minimize the risk of antimicrobial resistance. The effective use of medicines is promoted by following a sound scientific process that ensures that medicines are manufactured according to quality standards, are rationally prescribed through accurate diagnosis and are only dispensed based on a confirmed medical prescription. The correct application of scientific standards must be accompanied by awareness and support from local communities in all countries, besides the role of scientific and civil institutions and the individual's responsibility in the cautious and careful use of medicines, he added.

Dr Guido Sabatinelli the WHO Representative in Pakistan pointed out that Pakistan was one of the highest-risk countries for MDR-TB and revealed that a 2008-assessment conducted by WHO listed eight main problematic areas in the context of Pakistan. These include insufficient quality and capacity of the laboratory service for culture and DST, lack of representative data on the incidence and prevalence of drug-resistant forms of tuberculosis, lack of a unified approach to the programmatic management of the MDR-TB in Pakistan, unknown quality and limited availability of the second-line drugs, absence of appropriate follow-up of patients suffering from the MDR-TB by out-patient facilities resulting in dramatic proportion of defaulters, weak coordination of activities related to the registration and control of drug-resistant TB, deficiencies in infection control measures both in the healthcare facilities and bacteriological laboratories and gaps in the knowledge of healthcare personnel to perform tasks related to management of the MDR-TB. "All these problem areas are being addressed by the National TB Control Program with support from the WHO and GFATM" he added.

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