

Statement of I.R. Iran on:
"Promoting collaborative action to accelerate the regional response to antimicrobial resistance in the Eastern Mediterranean Region"
Session 2 - WED 16 Oct
10:00 - 11:00

The I.R. Iran, while expressing gratitude to the WHO/EMRO Secretariat for preparing this valuable technical paper, reiterates that antimicrobial resistance is a priority for health system and developmental program. Islamic Republic of Iran has benefited from people-centered approach in the second national program for Antimicrobial resistance, which is a human health sector plan. In this regard, ensuring universal access to quality preventive, diagnostic, and therapeutic services for infectious diseases has been prioritized. Governance and budgeting of this program will be on the agenda of the Supreme Council of Health and Food Security, under the leadership of H.E. the President of I.R. Iran.

The critical situation of antimicrobial use in Iran has been identified as the foremost priority. In this regard, we have developed a range of short, medium, and long-term actions including public awareness, mandatory educational programs for prescribers ending with certification in order to obtain or renew their medical practice licenses, and integration of antimicrobial use surveillance into the electronic health record system.

However, we think that the goal of "Ensuring that Access group antibiotics compromise at least 70% of overall antibiotic consumption in human" is a challenge in many countries. It is worth mentioning that Iran has sufficient technical capacity in developing national guidelines on appropriate use of antimicrobials using the AWaRe guideline. It is highly recommended that necessary standards for critical appraisal of evidences, in order to provide treatment recommendations be considered in the next edition of AWaRe guideline.

On the other hand, public health emergency programs must ensure the adequate supply of essential antibiotics, diagnostic tools and IPC equipment, and availability of required financial resources.

Regarding paragraph 20 of the paper, limiting collaborating countries in policy formulation to HICs should be considered by WHO in the region. Therefore, it is recommended to engage all member states in designing regional or global responses. Furthermore, some LMICs in the region possess research centers with high scientific capabilities, which should be invited to AMR research networks to utilize their capacities and collaboration in the regional studies effectively.

Madam/Mr. chairperson, thank you for this opportunity and many thanks for your attention.

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