### **INFECTIOUS DISEASES**

# ANTIMICROBIAL RESISTANCE IN INDIA

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Abstract: Antimicrobial resistance is projected to kill 10 million people by 2050. The biggest driver of antimicrobial resistance is irrational/unrestricted use of antimicrobials in humans and animals. Antimicrobial resistance is a problem in all types of pathogens including bacteria, mycobacteria, viruses, fungi and parasites in both India and in the world. However the biggest concern for India is the resistance in gram negative pathogens and Mycobacterium tuberculosis. The alarming rate of extended spectrum beta lactamase production in enterobacteriaceae in both community and health care associated infections is driving carbapenem use. Rates of carbapenem resistance are now significantly high in health care associated gram negative pathogens including E. Coli, Klebsiella pneumoniae, Pseudomonas aeruginosa and Acinetobacter baumannii with associated mortality rates of 50%. The epidemic of multidrug resistant and extremely drug resistant tuberculosis in India is a public health calamity. The key solution to this antimicrobial resistance crisis lies in promoting rational antimicrobial therapy and exercising antimicrobial stewardship.

Keywords: Antimicrobials, Resistance, India, Stewardship

### **Points to Remember**

- Antimicrobial resistance compromises treatment of infections and is associated with increased morbidity, mortality, adverse effects and cost of therapy.
- AR is fuelled largely by irrational use of antimicrobials in both humans and animals.
- AR in gram negative bacteria through production of extended spectrum beta lactamase (ESBL) and carbapenemases is alarming in the Indian health care setting.
- AR in S. pneumoniae to penicillins and cephalosporins is emerging, forcing change in empiric regimens for acute bacterial meningitis.
- *MDR and XDR in M. tuberculosis is a big hurdle in the elimination of tuberculosis from India.*
- The impact of resistance in other pathogens including Candida, influenza, HIV and malaria should not be forgotten.

### References

- 1. O'Neill J. Review on Antimicrobial Resistance Antimicrobial Resistance: Tackling a crisis for the health and wealth of nations. London: Review on Antimicrobial Resistance. 2014. Available from: https://amr-review.org/ sites/default/files/AMR%20Review%20Paper%20-%20Tackling% 20a% 20crisis% 20 for % 20 the % 20 health % 20 and % 20 wealth % 20 of % 20 nations 1.pdf.
- Kaye KS, Engemann JJ, Fraimow HS, Abrutyn E. Pathogens resistant to antimicrobial agents: epidemiology, molecular mechanisms, and clinical management. Infect Dis Clin North Am 2004; 18(3):467-511.
- 3. Magiorakos AP, Srinivasan A, Carey RB, Carmeli Y, Falagas ME, Giske CG, et al. Multidrug-resistant, extensively drug-resistant and pandrug-resistant bacteria: an international expert proposal for interim standard definitions for acquired resistance. Clin Microbiol Infect 2012; 18(3):268-281.
- Shinefield HR, Ruff NL. Staphylococcal infections: a historical perspective. Infect Dis Clin North Am 2009; 23(1):1-15.
- 5. Moolchandani K, Sastry AS, Deepashree R, Sistla S, Harish BN, Mandal J. Antimicrobial Resistance

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Surveillance among Intensive Care Units of a Tertiary Care Hospital in Southern India. J Clin Diagn Res 2017; 11(2):DC01-DC07.

- Emilda JK, Shenoy SM, Chakrapani M, Kumar P, Bhat KG Clinical spectrum and antimicrobial resistance pattern of skin and soft tissue infections caused by community acquired-methicillin resistant Staphylococcus aureus. Indian J Dermatol Venereol Leprol 2014; 80(6):539-540.
- Clinical and Laboratory Standards Institute. Performance standards for antimicrobial susceptibility testing; 24<sup>th</sup> informational supplement. Clinical and Laboratory Standards Institute; Wayne, PA: 2014. (CLSI document M100-S24).
- Singh J, Sundaresan S, Manoharan A, Shet A. Serotype distribution and antimicrobial susceptibility pattern in childrend"5years with invasive pneumococcal disease in India - A systematic review. Vaccine 2017; 35(35 Pt B):4501-4509.
- Manoharan A, Manchanda V, Balasubramanian S, Lalwani S, Modak M, Bai S, et al. Alliance for Surveillance of Invasive Pneumococci (ASIP) Study Group. Invasive pneumococcal disease in children aged younger than 5 years in India: a surveillance study. Lancet Infect Dis 2017; 17: 305-312.
- Verghese VP, Veeraraghavan B, Jayaraman R, Varghese R, Neeravi A, Jayaraman Y, et al. Increasing incidence of penicillin- and cefotaxime-resistant Streptococcus pneumoniae causing meningitis in India: Time for revision of treatment guidelines? Indian J Med Microbiol 2017; 35(2):228-236.
- 11. John J, Van Aart CJ, Grassly NC. The Burden of Typhoid and Paratyphoid in India: Systematic Review and Metaanalysis. PLoS Negl Trop Dis 2016; 10:e0004616.
- Klemm EJ, Shakoor S, Page AJ, Qamar FN, Judge K, Saeed DK, et al. Emergence of an Extensively Drug-Resistant Salmonella enteric Serovar Typhi Clone Harboring a Promiscuous Plasmid Encoding Resistance to Fluoroquinolones and Third-Generation Cephalosporins mBio 2018; 9(1).pii: e00105-18.
- 13. Taneja N, Mewara A. Shigellosis. Epidemiology in India. Indian J Med Res 2016; 143: 565-576.
- 14. Bush K. Bench-to-bedside review: The role of betalactamases in antibiotic-resistant Gram-negative infections. Crit Care 2010; 14(3):224.

- Balasubramanian S, Kuppuswamy D, Padmanabhan S, Chandramohan V, Amperayani S. Extended-spectrum Betalactamase-producing Community-acquired Urinary Tract Infections in Children: Chart Review of Risk Factors. J Glob Infect Dis 2018; 10: 222-225.
- Alagesan M, Gopalakrishnan R, Panchatcharam SN, Dorairajan S, Mandayam Ananth T, Venkatasubramanian R. A decade of change in susceptibility patterns of Gramnegative blood culture isolates: a single center study. Germs 2015; 5(3):65-77.
- 17. Jajoo M, Manchanda V, Chaurasia S, Sankar MJ, Gautam H, Agarwal R et al; Investigators of the Delhi Neonatal Infection Study (DeNIS) collaboration, New Delhi, India. Alarming rates of antimicrobial resistance and fungal sepsis in outborn neonates in North India. PLoS One 2018; 13:e0180705.
- Revised National Tuberculosis Control Program. India TB report 2018. Available on https://tbcindia.gov.in/ showfile.php?lid=3314. Accessed on March 21, 2019.
- World Health Organization. WHO consolidated guidelines on drug-resistant tuberculosis treatment 2019. Available on https://www.who.int/tb/publications/2019/consolidatedguidelines-drug-resistant-TB-treatment/en/. Accessed on March 21, 2019.
- 20. Chakrabarti A, Sood P, Rudramurthy SM, Chen S, Kaur H, Capoor M et al. Incidence, characteristics and outcome of ICU-acquired candidemia in India. Intensive Care Med 2015; 41:285-295.
- 21. Karade S, Chaturbhuj DN, Sen S, Joshi RK, Kulkarni SS, Shankar S, Gangakhedkar RR. HIV drug resistance following a decade of the free antiretroviral therapy programme in India: A review. Int J Infect Dis 2018; 66: 33-41.
- 22. National Vector Borne Disease Control Program. Guidelines for Diagnosis and Treatment of Malaria in India 2014. Available at http://www.mrcindia.org/ Diagnosis%20of%20Malaria%20pdf/Guidelines% 202014.pdf. Accessed on March 21, 2019.
- 23. Ghafur A, Mathai D, Muruganathan A, Jayalal JA, Kant R, Chaudhary D, et al. The Chennai Declaration: a roadmap to tackle the challenge of antimicrobial resistance. Indian J Cancer 2013; 50:71-81.