

WHO Includes Policy, Regulatory Reform as Priority for Combating Antimicrobial Resistance

Issue/problem

An estimated [5 million deaths per year](#) are associated with drug-resistant bacteria, with a higher burden among low- and middle-income countries (LMICs). Although UN members pledged to coordinate their approach to address AMR in [2016](#), there remains significant knowledge gaps hindering an effective response to AMR.

Description of the problem

The implementation of national action plans on AMR has made minimal progress. [Fewer than a fifth](#) of the national action plans of 178 countries are funded or implemented. Furthermore, initiatives aimed at bridging gaps in AMR research fail to identify key research priorities due to the complexity of AMR.

Results

In response, the [WHO research agenda for antimicrobial resistance \(AMR\) in humans](#) has identified 40 research priorities to be addressed by 2030. Policies and regulations relating to AMR was included as one of the overarching topics within the research priorities. A key priority within that topic is the evaluation of the effect of regulatory frameworks, marketing incentives, and sustainable financing models on the development of new antimicrobial drugs. Push incentives alone [are insufficient](#) to ensure a strong pipeline of new antimicrobials; however, pull mechanisms must ensure equitable access and be feasible in low-resource settings.

Lessons learned

[The literature on pull mechanisms](#) underscore the point that incentives should not be linked to the volume of sales due to the need to [utilize new antibiotics prudently](#) to avoid resistance development. A possible mechanism could be transferable exclusivity vouchers, which would be awarded to innovators of novel antibiotics that can extend the exclusivity period of any patented medicine. [It is argued](#) that vouchers would shift the cost of antibiotic development onto an arbitrary set of patients whose medicines are subject to vouchers. Furthermore, vouchers would not guarantee predictable access to the antibiotic and fails to address the issue of new drugs being registered first in higher-income countries.