

The emergence of antimicrobial resistant infections stands as one of the most significant health threats of our time. The continued inappropriate or overuse of antimicrobials has accelerated the development of antimicrobial resistance (AMR), putting currently treatable infections at risk of becoming life-threatening in the near future.

‘In Australia, the inappropriate and overprescription of antimicrobials in primary care remains a concerning issue, with 80% of antibiotics being consumed within this setting’ says AHHA Chief Executive Kylie Woolcock. ‘Embracing the concept of antimicrobial stewardship (AMS) in primary care will be pivotal to promoting the appropriate use of antibiotics and reducing the risk of antimicrobial resistance.’

Released today by the Australian Healthcare and Hospitals Association’s (AHHA) Deeble Institute for Health Policy Research, the Issues Brief [‘Optimising antimicrobial stewardship in Australian primary care’](#), is co-authored by 2022 Jeff Cheverton Memorial Scholar, Dr Sajal K Saha from Deakin University.

‘AMS processes have already been well established in Australian hospitals, with a key factor in its success being that clinicians were responsible for the design and implementation of these AMS programs,’ continues Ms Woolcock.

‘This, however, is yet to occur across the primary care space. The already established expertise in AMS programs in the acute care environment will be important in helping to establish effective AMS education and support programs in the primary care sector.’

There are multiple practical and systemic barriers to implementing AMS in primary care. These include patient demand for antibiotics, diagnostic uncertainty, and limited AMS training.

‘In order to start to overcome these barriers, both general practice and community pharmacy must be empowered to harness tools for better prescribing such as point-of-care testing and clinical decision support tools.’

‘We also need to see improvements in data management in this area, as complete data on prescribing trends is crucial to assessing prescribing habits and informing policy priorities.

‘New data collection platforms and improvements to current systems can enable real-time monitoring and help to improve collaboration between GPs and community pharmacists, and ultimately improve outcomes for patients.

‘This issues brief explores the need for a national AMS implementation framework, and the GP-pharmacist collaborative models of care required to improve AMS in primary care.

The online version of this [media release](#) and the Issues Brief [‘Optimising antimicrobial stewardship in Australian primary care’](#), can be found on the AHHA website. **The Australian Healthcare and Hospitals Association (AHHA) is the independent peak membership body and advocate for the Australian healthcare system and a national voice for universally accessible, high-quality healthcare in Australia.**

Media enquiries: Kylie Woolcock, Chief Executive, AHHA, 0410 625 830

‘Recommendations are made to address gaps in current health systems structures, and policies that support GP-pharmacist collaboration for AMS and provide a defence against antimicrobial resistance (AMR) in primary care.’

The Jeff Cheverton Memorial Scholarship is supported by North West Melbourne and Brisbane North Primary Health Networks.

The online version of this [media release](#) and the Issues Brief ‘[Optimising antimicrobial stewardship in Australian primary care](#)’, can be found on the AHHA website. **The Australian Healthcare and Hospitals Association (AHHA) is the independent peak membership body and advocate for the Australian healthcare system and a national voice for universally accessible, high-quality healthcare in Australia.**

Media enquiries: Kylie Woolcock, Chief Executive, AHHA, 0410 625 830