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- Cheshire & Merseyside AMR Activities Update - GNBSI, 2018/19
- AMR sources of information, recent evidence / intelligence and NICE guidance

Key Links

[Antimicrobial Resistance \(AMR\) - GOV.UK](#)

Contains:

- Strategic publications
- Clinical or technical guidance and publications
- Resources for healthcare professionals
- Resources for livestock professionals
- Research
- News

TARGET Antibiotic Toolkit

An antimicrobial stewardship toolkit and resources for Primary Care in the UK. Produced by The Royal College of General Practitioners (RCGP).

Start Smart & Then Focus

An antimicrobial stewardship toolkit and resources for hospitals in England. Produced by PHE.

Fingertips

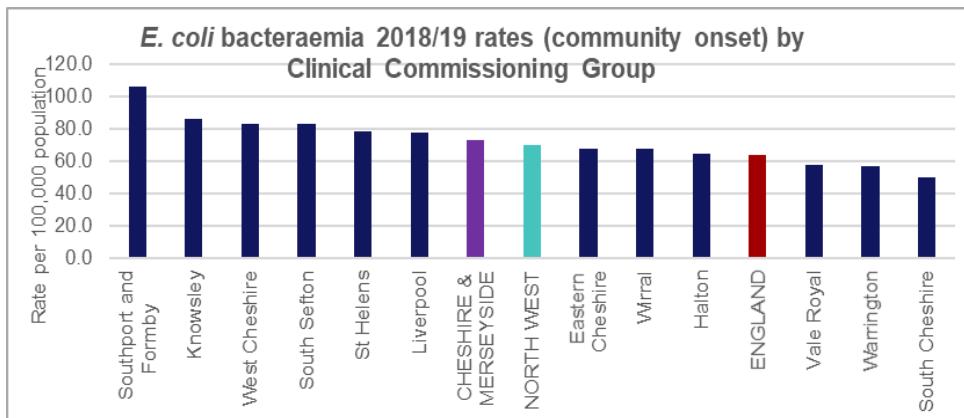
A repository of interactive profiles and indicators covering a wide range of health and wellbeing themes including antimicrobial stewardship and resistance. It is aimed at commissioners and strategic planners. Run by PHE.

If you have any questions regarding C&M AMR work or this Bulletin, please contact:

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Cheshire & Merseyside AMR Activities: Gram-negative bacteria bloodstream infection (GNBSI) summary 2018/19

- Cheshire & Merseyside is one of the top five healthcare systems in England with the highest number of *E. coli* bacteraemias reported during 2018/19.
 - A total of 2265 *E. coli* bacteraemia cases were reported in C&M between 1 April 2018 and 31st March 2019; of these, 20% were hospital onset.
 - The C&M 2018/19 rate (73/100,000) for community onset *E. coli* bacteraemias was higher than both the England (64/100,000) and North West (69.8/100,000), with the highest rates seen in Southport and Formby, Knowsley, West Cheshire and South Sefton (see below); both Southport and Formby and West Cheshire have seen substantial increases in their rates since 2014/15.



Note: the full report can be found [Here](#)

- Cheshire & Merseyside NHS England will be hosting a thematic Single Item Quality Surveillance Group (SIQSG) meeting on AMR, GNBSI, with a focus on *E. coli* bacteraemias on 3rd Sept 2019 12.30 – 14.20 pm at Council Chambers, Runcorn Town Hall, Runcorn WA7 5TD. The meeting will aim to bring key people from NHS England, CCGs, primary and secondary care and LA public health, together to both look at what is already in place across the system & identify areas that require additional focus.

New and Recent Publications

A high-quality trial on CRP and acute exacerbations of chronic obstructive pulmonary disease (COPD) was published in *New England Journal of Medicine* (NEJM) recently: “C-Reactive Protein Testing to Guide Antibiotic Prescribing for COPD Exacerbations”. [Here](#)

Background

Point-of-care testing of C-reactive protein (CRP) may be a way to reduce unnecessary use of antibiotics without harming patients who have acute exacerbations of COPD.

Methods

A multi-centre, open-label, randomized, controlled trial involving patients with a diagnosis of COPD in their primary care clinical record who consulted a clinician at 1 of 86 general medical practices in England and Wales for an acute exacerbation of COPD. The patients were assigned to receive usual care guided by CRP point-of-care testing (CRP-guided group) or usual care alone (usual-care group). The primary outcomes were patient-reported use of antibiotics for acute exacerbations of COPD within 4 weeks after randomization.

Results

A total of 653 patients underwent randomization. Fewer patients in the CRP-guided group reported antibiotic use than in the usual-care group (57.0% vs. 77.4%; adjusted odds ratio, 0.31; 95% confidence interval [CI], 0.20 to 0.47).

Conclusions

CRP-guided prescribing of antibiotics for exacerbations of COPD in primary care clinics resulted in a lower percentage of patients who reported antibiotic use and who received antibiotic prescriptions from clinicians, with no evidence of harm.

Next AMR Board Meeting

Tuesday 3rd September 14:30 – 16:30 at Halton Council Chamber, Runcorn Town Hall, Heath Road, Runcorn WA7 5TD.