



## MINI - SURVEY RESULTS AND DISCUSSION

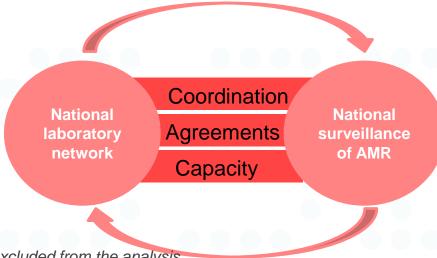
3 October, 2022 Egle Kudirkiene



## PURPOSE AND CONTENT OF THE SURVEY



- To capture the current NRL knowledge about:
  - The national laboratory network to support national surveillance of AMR in *Salmonella* and in *Campylobacter*
  - Testing detection and characterization capacities in local/regional laboratories
  - Needs for support from FWD AMR RefLabCap team
- Launched on 9 September 2022
  - No. of respondents
    - Salmonella:
      - EU Health programme\*: 29 NRLs\*\*
    - Campylobacter
      - EU Health programme\*: 27 NRLs\*\*



\*four countries that are not part of EU Health programme were excluded from the analysis \*\*two NRLs were excluded from the analysis

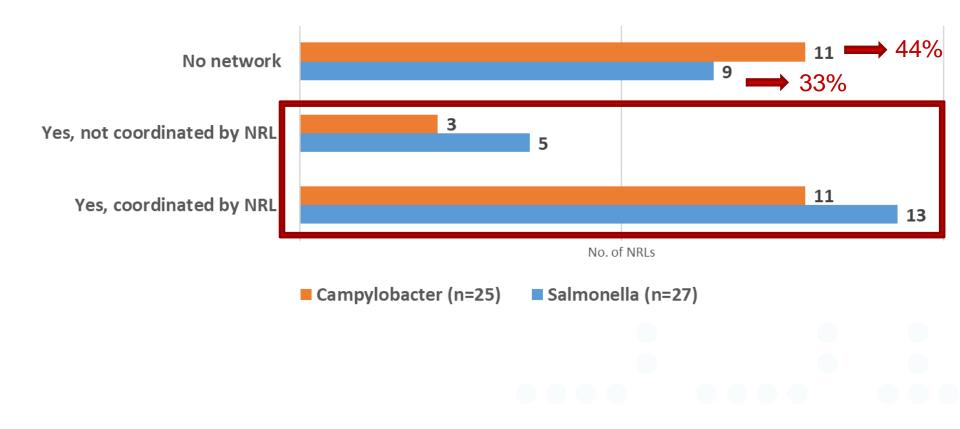


## MINI - SURVEY RESULTS

## NATIONAL LABORATORY NETWORKS



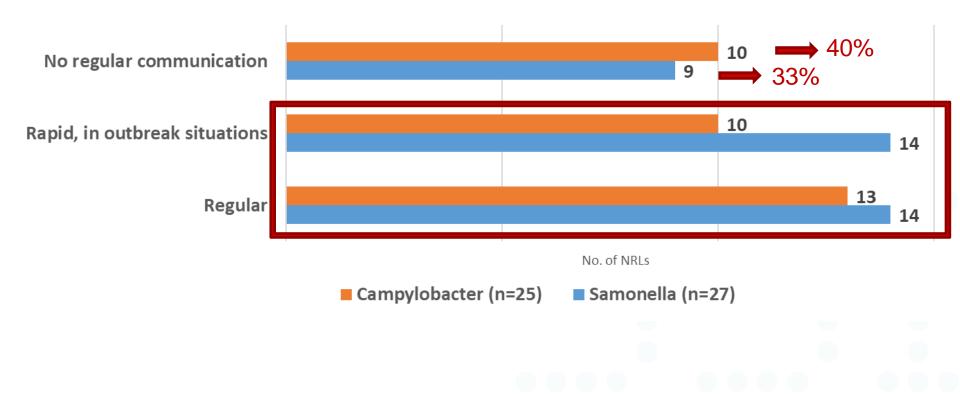
Is there a functional network of regional/local laboratories that supports the national surveillance of *Salmonella* and *Campylobacter* in humans in your country?



### COMMUNICATION



# Does your laboratory have regular communication with the local/regional laboratories?



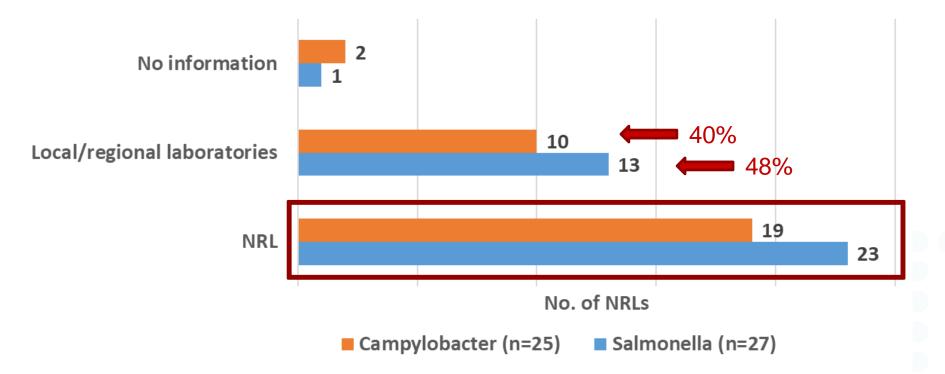


- Majority of NRLs (90%) provided a response:
  - Providing samples/isolates/data for surveillance of AMR in Salmonella
    - Public/government funded: 1-146, Average = 20
    - Private: 1-107, Average = 16
  - Providing samples/isolates/data for surveillance of AMR in Campylobacter
    - Public/government funded: 5-56, Average = 13
    - Private: 1-58, Average = 10
- In approx. 48% of the cases, higher number of the laboratories that perform detection than of the laboratories that send samples/isolates/data for surveillance of AMR was reported for both types of the laboratories
- Few NRLs provided only:
  - the number of laboratories performing detection
  - the number of laboratories sending samples/isolates/data for surveillance of AMR

### SOURCES OF AMR SURVEILLANCE DATA

#### SERUM INSTITUT

## The sources of antimicrobial resistance testing data that is used for the national surveillance of AMR in *Salmonella* and in *Campylobacter*

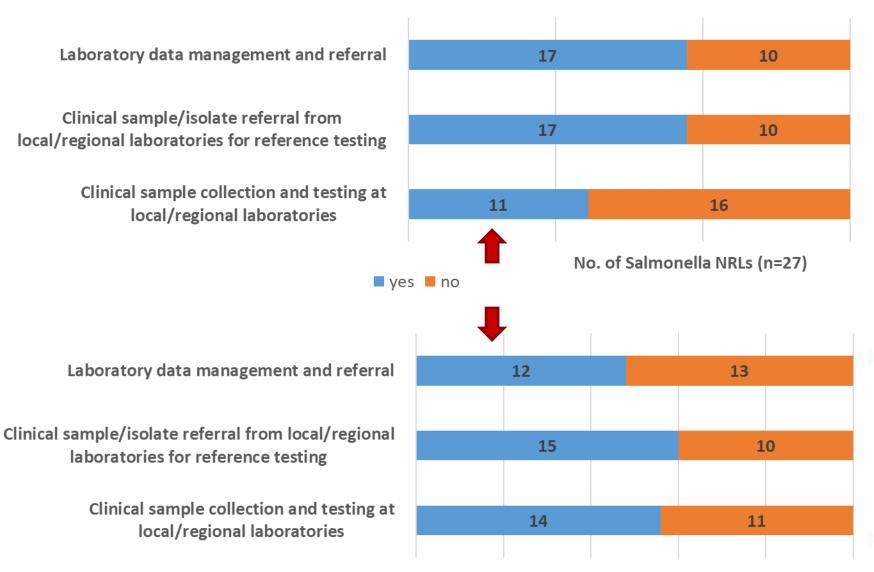


A combination of testing in both NRL and local/regional laboratories:

- Salmonella: 7 NRLs
- Campylobacter: 4 NRLs



### AGREEMENTS FOR SURVEILLANCE OF AMR



No. of Campylobacter NRLs (n=25)

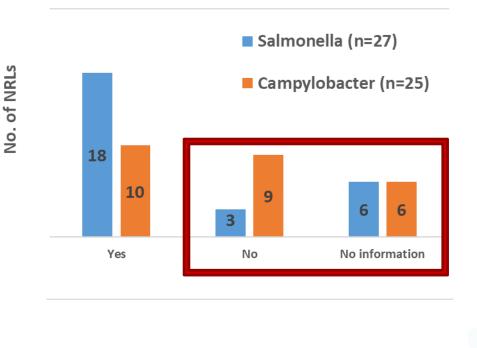
🛛 yes 📕 no

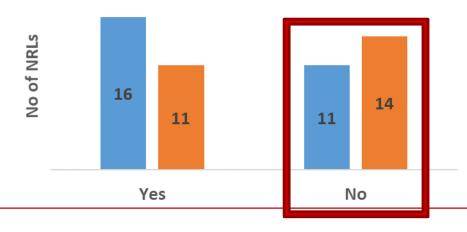
## AMR SURVEILLANCE COVERAGE AND DATA

STATENS SERUM INSTITUT

Is a sufficient amount of clinical samples/isolates/AMR data available for the national surveillance of AMR to ensure a representative population coverage (e.g. population size, geography, age, gender)?

Does your laboratory receive sufficient case and laboratory data (including the methods used) for *Salmonella* and *Campylobacter* positive clinical samples/isolates sent for reference testing?





## CAPACITY - DETECTION AND CHARACTERIZATION SEA



Availability of the financial resources e.g. salaries, purchase of equipment, reagents, etc.

Methodology and the quality procedures

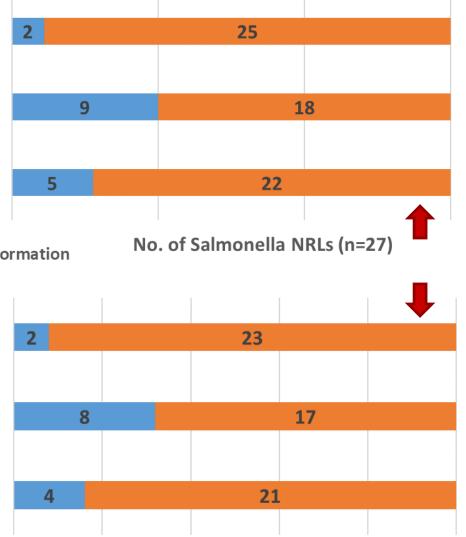
Qualifications and training of leadership and technical staff

Yes No information

Availability of the financial resources e.g. salaries, purchase of equipment, reagents, etc.

Methodology and the quality procedures

Qualifications and training of leadership and technical staff



Yes No information

No. of Campylobacter NRLs (n=25)

## SUMMARY 1/2



- The national laboratory network for Salmonella and for Campylobacter was absent in 33% and 44% countries, respectively
  - The presence/absence of national laboratory network did not have an effect on the responses to other questions of the survey
- Most of the NRLs (90%) knew the type and the number of laboratories performing detection of the pathogens and sending samples/isolates/data for AMR surveillance
  - In 48% (*Salmonella*) and 40% (*Campylobacter*) of the countries AMR testing is performed in local/regional laboratories
  - 33% (*Salmonella*) and 40% (*Campylobacter*) of NRLs did not have regular communication with local/regional laboratories

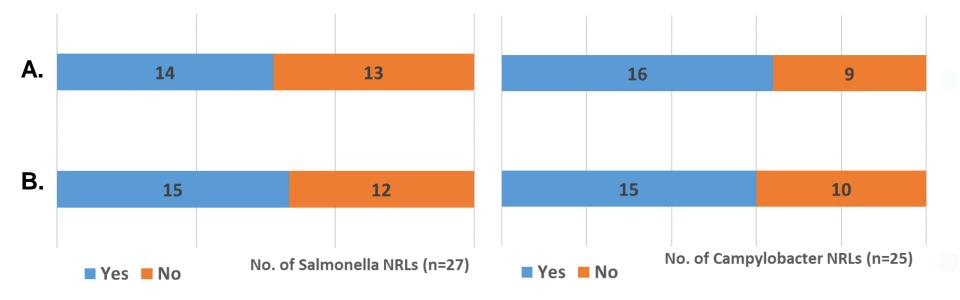


The responses further indicated:

- 36-60% of the countries did not have various agreements for AMR surveillance
- >68% of the NRLs did not have knowledge about the capacity for pathogen detection/characterization in local/regional laboratories
- Insufficient AMR surveillance coverage or lack of knowledge about it in 33% (Salmonella) and 60% (Campylobacter) NRLs
- Insufficient metadata about human cases in 41% (Salmonella) and 56% (Campylobacter) of the NRLs

A. Need for support in developing national capacity building activities for the regional/local laboratories

B. Need for support to further improve or establish and coordinate a national laboratory network of regional/local laboratories to support the national surveillance of AMR in Salmonella/Campylobacter





## **BREAK-OUT GROUP DISCUSSION 1**

The national laboratory networks and needs for capacity building in local/regional laboratories



- In your group discuss (30 min)
  - Discuss the importance and functions of a national laboratory network
  - How national laboratory network is/could be established and coordinated in your country?
  - Is there a need for capacity building in the local/regional laboratories in your country; how can you support this? (Detection and characterization e.g. AMR testing)
- Report in the plenum the summary of the discussion (2-3 min per group)