Adopt AWARe
Handle antibiotics with care
AWaRe – a new WHO tool to help countries improve antibiotic treatment, increase access and reduce resistance.

We can reduce or even reverse antibiotic resistance by using antibiotics more responsibly. But how do we do that and still ensure that patients are treated effectively?

WHO has developed a tool to help global, regional and national decision-making on which antibiotics to use when. The tool indexes the most effective antibiotics into three groups – ACCESS, WATCH, RESERVE (AWaRe for short).

Evidence shows that to optimize use of antibiotics and reduce resistance, countries should increase the proportion of ACCESS antibiotics to correspond to at least 60% of total national consumption.

Antimicrobial resistance is one of our urgent global challenges and we need to join together to stop it in its tracks. AWaRe can help us do that. It is a great tool to orient policy-makers, doctors and prescribers on how to preserve antibiotics while still getting everyone treated. Adopting AWaRe will ensure that today’s antibiotics keep working for tomorrow’s children.

**TEDROS ADHANOM GHEBREYESUS**
WHO Director-General
We must act together with urgency

Failing to tackle antimicrobial resistance, especially by improving the way we use antibiotics, will:

- prevent us from treating serious and even common infections
- make surgery riskier
- place mothers’ and their newborns’ lives at risk
- deplete health resources.

This is why the majority of countries in the world endorsed the [WHO Global Action Plan for Antimicrobial Resistance](https://www.who.int/antimicrobial-resistance) in 2015.

A key objective of the action plan is to optimize antibiotic use by increasing access to the antibiotics at lower risk of resistance and reducing use of the antibiotics at higher risk – those that are most valuable for human health.

---

40% to 60%

In selected low- and middle-income countries, the proportion of resistant infections ranges from 40-60% compared to an average of 17% for OECD countries (OECD).

671,689

In 2015, there were 671,689 infections with antibiotic-resistant bacteria recorded in the EU (The Lancet).

2.4 m

Superbug infections could cost the lives of around 2.4 million people in Australia, Europe and North America over the next 30 years if no action is taken (OECD).
As part of the update of the WHO Model List of Essential Medicines in 2017, WHO carried out a comprehensive review of antibiotics and introduced a new categorization to guide prescriptions and treatment while monitoring consumption. The three categories are:

- **Access**
  - which indicates the antibiotic of choice for each of the 25 most common infections. These antibiotics should be available at all times, affordable and quality-assured.

- **Watch**
  - which includes most of the “highest-priority critically important antimicrobials” for human medicine and veterinary use. These antibiotics are recommended only for specific, limited indications.

- **Reserve**
  - antibiotics that should only be used as a last resort when all other antibiotics have failed.

The overall goal is to **reduce the use of Watch Group and Reserve Group antibiotics (the antibiotics most crucial for human medicine and at higher risk of resistance), and to increase the use of Access antibiotics where availability is low.**

Visit the AWARe Portal: essentialmeds.org
Evidence shows that to promote responsible use of antibiotics, **ACCESS antibiotics should make up at least 60% of national consumption.** This will not only result in better use of antibiotics but also in reduced costs and increased access. Reaching this threshold by 2023 will contribute to countries’ achieving health-related targets of the Sustainable Development Goals.

**HOW DOES IT WORK?**

By using AWaRe as an index to measure antibiotic consumption in different health care settings, countries will gain an insight into the use of antibiotics at national level. Once these benchmarks have been established, policy makers will have the tools to adjust consumption to local needs and prescribers will have clear guidance on what to prescribe when.

**WHERE ARE WE SO FAR?**

AWaRe has the support of the G20 (see the [Declaration of the G20 Meeting of Health Ministers](https://www.g20.org/en/communiques/2018/health ministers) on 4 October 2018). It is an important indicator in WHO’s new 5-year plan to measure countries’ progress in tackling AMR. Some countries have already adopted it to address resistance and monitor antibiotic use:

- Bangladesh
- Germany
- Maldives
- Switzerland
- United Kingdom
- United Republic of Tanzania
5 MORE REASONS WHY COUNTRIES SHOULD ADOPT AWARE AS A BENCHMARK FOR OPTIMAL USE

1. **Public health gains** – antibiotics, one of the best inventions of modern medicine, will keep working for human health
2. **Increased access, reduced costs** – many of the antibiotics in the Access list are among those that are more affordable
3. **More responsible prescription and use** – Countries made a commitment in 2015 to reduce antimicrobial resistance, including by promoting responsible use of antibiotics
4. **Preservation of critical antibiotics** – by increasing use of the Access list and reducing use of Watch and Reserve
5. **Better therapeutic results** – the AWaRe categories specify which antibiotics to use for specific syndromes, including when a laboratory diagnosis is not available

WHAT COUNTRIES CAN DO

- **Monitor and report antibiotic use in community and hospitals** using the AWaRe categories for evaluation, benchmarking and setting targets
- **Adopt the AWaRe index** as part of national antibiotic stewardship programmes to improve access to essential antibiotics
- **Ensure local and national guidelines** consider the WHO Essential Medicines List and apply the AWaRe categories in their recommendations for the optimal use of antibiotics
- **Incorporate the AWaRe categories** into pre- and in-service training for health-care professionals
- **Monitor and report antibiotic use in the veterinary and agricultural fields** according to the WHO list of medically important antimicrobials and the AWaRe categorization
Antibiotics are not like other medicines – they are critical for human health and they are vulnerable.

**DR MARIÂNGELA BATISTA GALVÃO SIMÃO**
Assistant Director-General, Medicines, Vaccines and Pharmaceuticals

Adopt AWaRe to ensure antibiotics keep working for all of us and help to make the world safer and healthier.
ADOPTAWARE.ORG

Contact: empinfo@who.int