

BHEKISISA TRACKING EMBED CODE

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Headline: [WATCH] How to beat superbugs on a tight budget

Blurb: Superbugs are fighting back and our state hospitals don't have the right specialists or enough funding to stop more germs from becoming untreatable.

Bullets:

- Funding for South Africa's first action plan on drug resistance has been insufficient and the first set of goals expires in two years. Antibiotic resistance happens when these medicines are overused or prescribed to treat the wrong bacteria.
- A study of 57 hospitals in KwaZulu-Natal found that only three facilities had any money to use to roll out the plan.
- There are work-arounds hospitals and clinics can employ in the absence of a budget, and a full team of specialists to make sure antibiotics are prescribed responsibly. Watch this video for the details.

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South Africa's first action plan to stop drug resistance expires in 2024.

When antibiotics are used too often, or to treat the wrong bacteria, bugs can become resistant to the medicine or even untreatable.

The country's action plan requires hospitals to set up teams to make sure that antibiotics aren't used in the wrong way.

This is called "antimicrobial stewardship".

A 2022 study of 57 hospitals in KwaZulu-Natal found that just three facilities had any money for stewardship.

There aren't enough specialists in state hospitals to help catch the signs of resistance early.

In KZN, 40% of the hospitals had a microbiologist (someone who studies bacteria).

Only two hospitals had an infectious diseases specialist.

It's a nationwide issue. Four of South Africa's nine provinces don't have any infectious disease specialists in the state sector.

What can hospitals do?

Without an in-house infectious disease specialist, hospitals can contract off-site specialists.

The specialist can call in once a week and help the hospital to identify bacteria that have become resistant to treatment early via data collection.

The other option is for pharmacists to lead stewardship teams.

A study of 8 hospitals in Cape Town showed that the number of antibiotic prescriptions dropped when pharmacists were involved.

And if there aren't enough pharmacists? Nurses can help.

Nurses can be trained in antimicrobial stewardship. Nurse-led teams can help hospitals to use antibiotic drugs responsibly.

Prescription charts can also help. Such forms can guide health workers to prescribe these antibiotics carefully.

The form requires prescribers to give reasons for administering the chosen drug.

It also reminds health workers to send a sample to a lab to confirm what kind of bug has to be treated before they give patients any medicine.

This is so that doctors make sure they choose the right antibiotics to treat the specific germ that's making someone sick.

Picking the wrong drug will give the bug a chance to learn how to dodge the medicine's attack. If it's a virus that's causing illness, antibiotics won't work at all.

At Groote Schuur hospital in Cape Town, prescription charts slashed the number of antibiotics scripts issued by a fifth.

The hospital's spending on antibiotics also dropped by 35%.

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