



Hong Kong, 13-14/11/18

AMR Surveillance Programme in food in China

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Surveillance is the key component of global action plan



2015:

Global action plan on antimicrobial resistance (Strategic objective 2: Strengthen the knowledge and evidence base through surveillance and research)

- ▶ **Global Antimicrobial Resistance Surveillance System (GLASS)**
- ▶ **WHO Advisory Group on Integrated Surveillance of Antimicrobial Resistance - with AGISAR 5-Year Strategic Framework to Support Implementation of the Global Action Plan on Antimicrobial Resistance (2015-2019)**



2016:

- ▶ **The FAO Action Plan on Antimicrobial Resistance 2016 - 2020 (Focus Area 2: Develop capacity for surveillance and monitoring of Antimicrobial Resistance and antimicrobial use in food and agriculture)**



2016:

- ▶ **CCEXEC71 and CAC39 considered: (1) revision of the Code of practice to minimize and contain antimicrobial resistance and development of guidance on integrated surveillance of antimicrobial resistance. (2) establishment of a TFAMR.**

Surveillance of Antimicrobial Use

WHO:

- ▶ Should establish systems to determine the amounts of antimicrobials given to food animals

WHO/FAO/OIE:

- ▶ AMU is a main driver for AMR
- ▶ Improved AMU in both humans and animals is needed to combat AMR, includes information on the individual patients (human or animal) and the indication for treatment

Integrated Surveillance of AMR in Foodborne Microorganisms

Surveillance of AMU



Animal



Human

Surveillance of AMR

Animal



Human

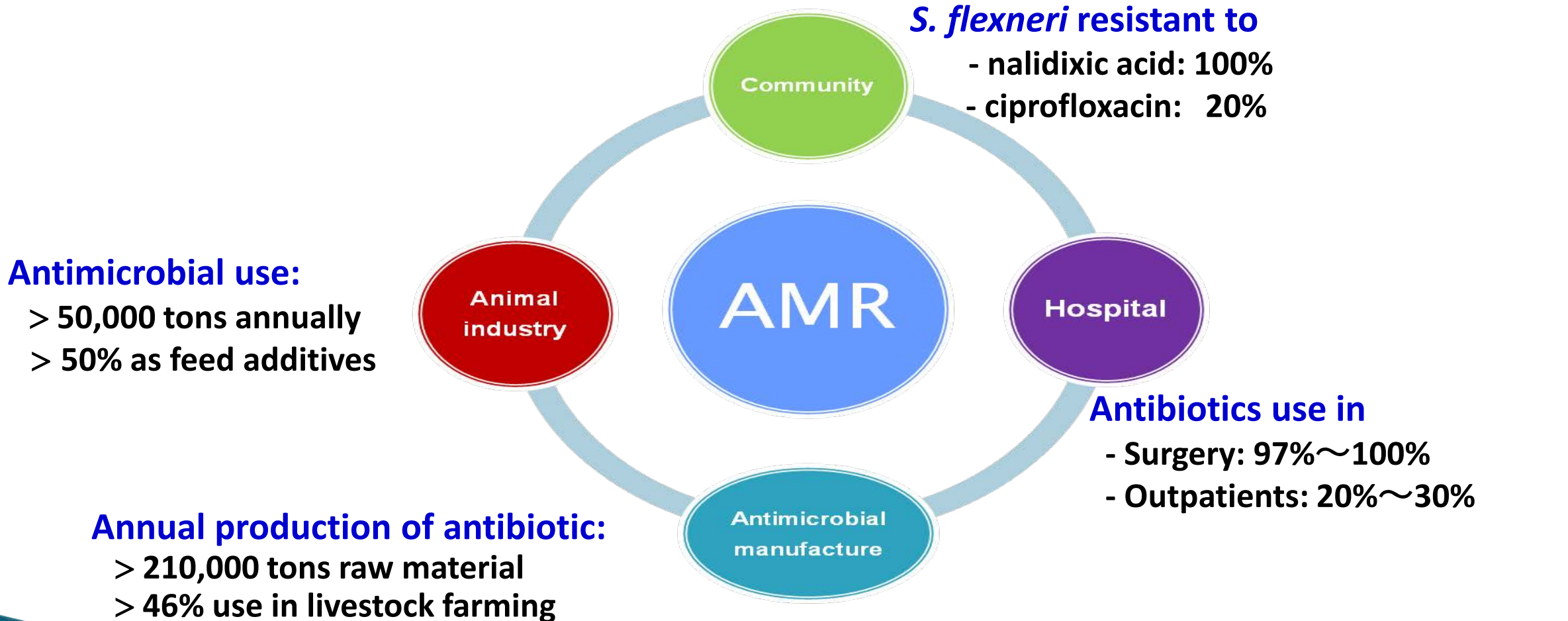


Food



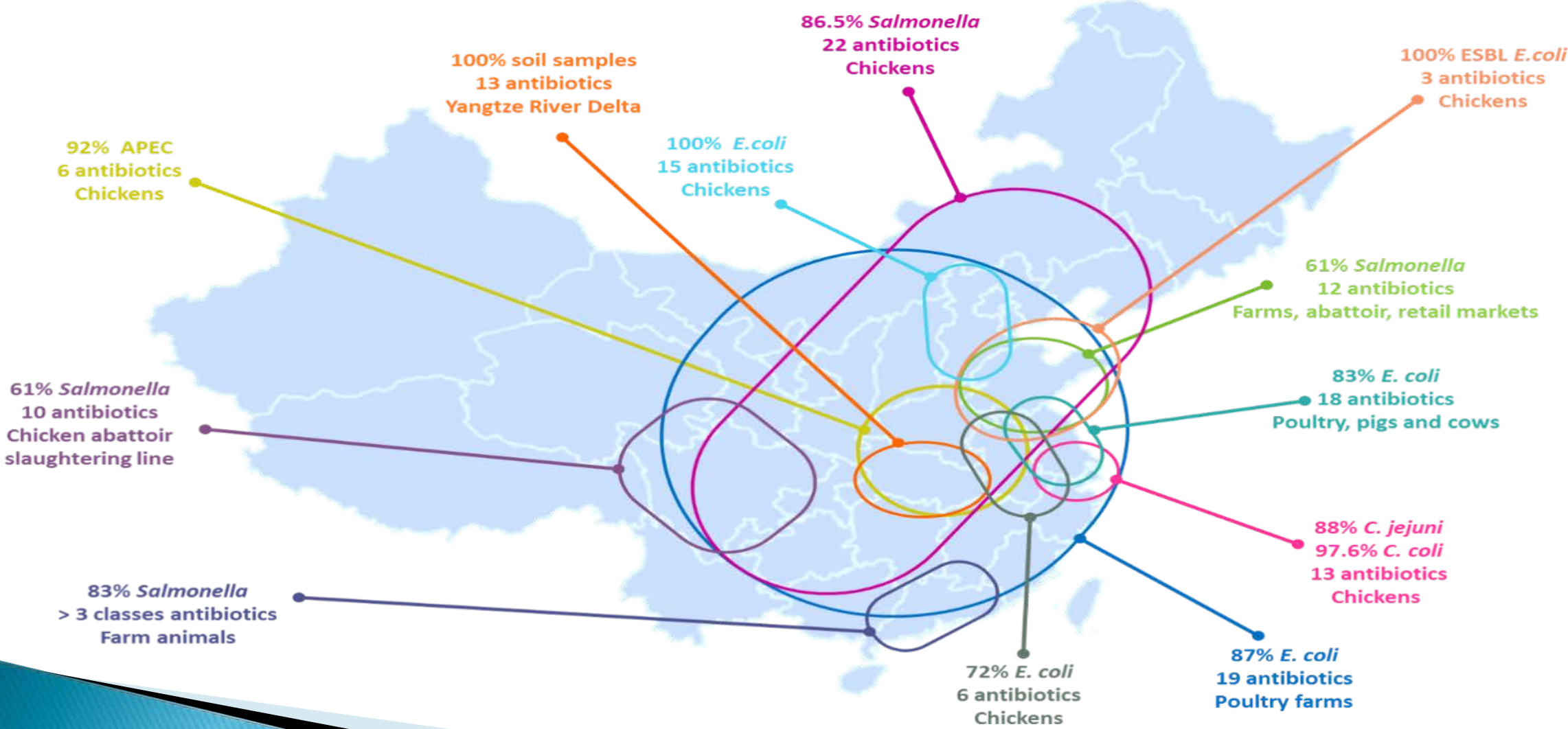
- **WHO:** integrated Surveillance of Antimicrobial Resistance in Foodborne Bacteria: Application of a One Health Approach
- **Codex:** Proposed draft guidelines on integrated Surveillance of antimicrobial resistance (TFAMR EWG COP2)

Link of AMR Emerge in China



- Li et al. China practical medicine, 2010, 5(1): 159-160.
- Jia et al. Anhui Agriculture Science . 2007, 35 (5) :1368-1370.
- Development report of the veterinary drug Industry in China, 2013.

Multi-drug resistance of *E. coli*, *Salmonella* and *Campylobacter* isolated from poultry and environment in animal production provinces in China



Xie et al., 2017; Chen et al., 2012; Zhang et al., 2015.

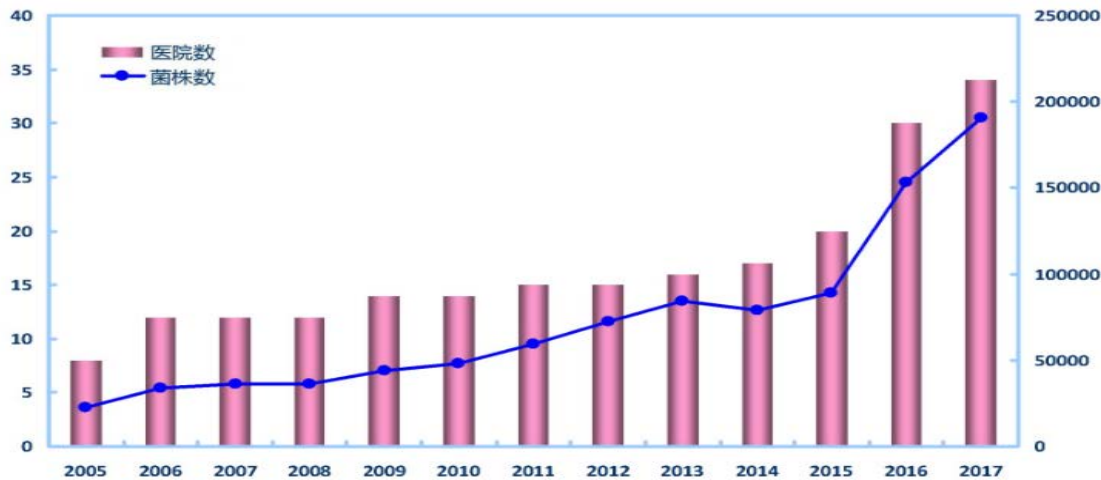
AMR Surveillance Networks in China



Bacteria and antimicrobials monitored mandatory in clinical samples

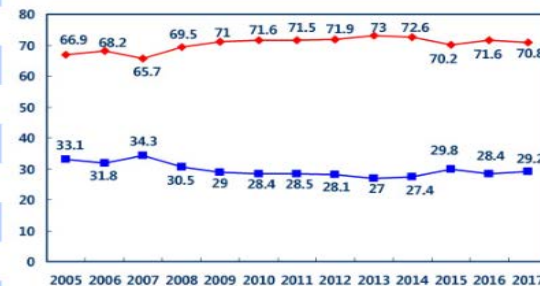
Bacteria	Antimicrobial agents
<i>Staphylococcus</i>	Penicillin, ceftazidime (or benzimidazole), erythromycin, Clindamycin
<i>Streptococcus pneumoniae</i> :	Penicillin, vancomycin, ceftriaxone (or cefotaxime), meropenem
<i>β-hemolytic streptococcus</i> :	erythromycin, Clindamycin
<i>Streptococcus viridans</i> :	Penicillin (ampicillin)
<i>Enterococcus</i>	Penicillin (or ampicillin), gentamicin (high concentration) or Streptomycin (high concentration)
<i>Haemophilus influenzae</i>	Ampicillin, SMZco
<i>Enterobacteriaceae (E coli, Klebsiella, Proteus, Enterobacter, Bacillus citrate, Serratia)</i>	Ampicillin, Cefazolin, gentamicin (or tobramycin)
<i>Enterobacteriaceae (Salmonella, Shigella)</i>	Ammonia-ampicillin, ceftriaxone (or cefotaxime), levofloxacin
<i>Pseudomonas aeruginosa</i>	Piperacillin/Tazobactam, ceftazidime, gentamicin (or tobramycin)
<i>Acinetobacter</i>	Ampicillin/Sulbactam, ceftazidime, Imipenem (or Meropenem) South, Niepenand), gentamicin (or tobramycin)
<i>Maltophilia Maltophilia</i>	SMZco
<i>Burkholderia cepacia</i>	SMZco, Meropenem, levofloxacin
<i>Others non- Enterobacteriaceae</i>	Ceftazidime, Gentamycin (or tobramycin)

CHINET监测网历年成员单位及监测总菌株数量

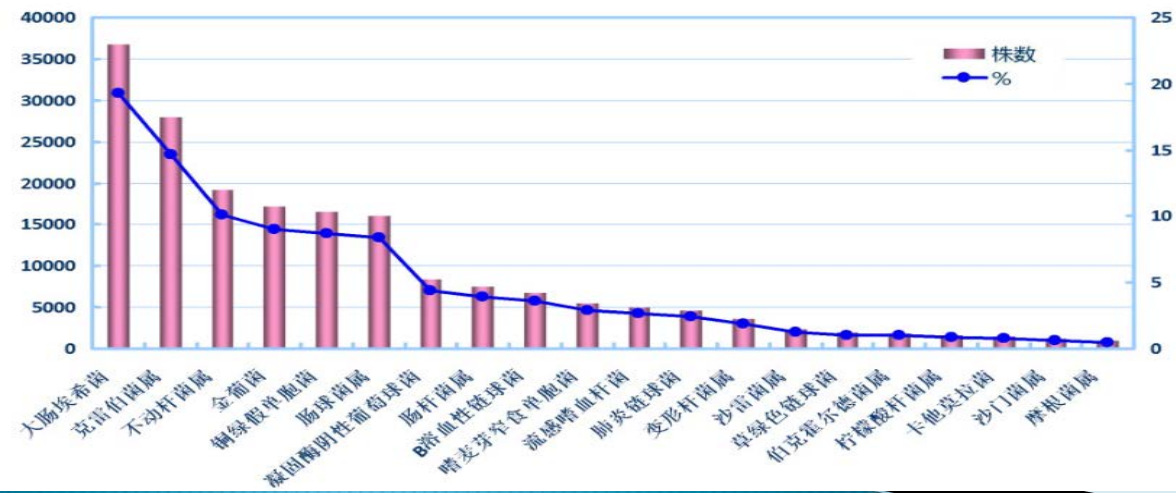


历年革兰阴性菌和阳性菌菌株数及占比

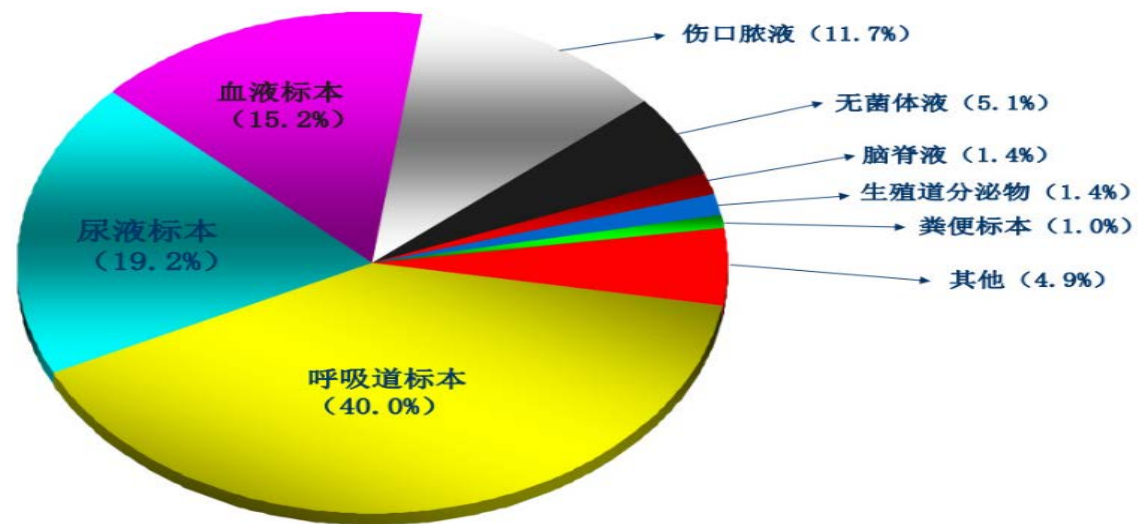
年份	医院数	株数	革兰阴性菌	革兰阳性菌
2005年	8	22774	15244	7530
2006年	12	33811	23062	10749
2007年	12	36001	23637	12364
2008年	12	36216	25184	11032
2009年	14	43670	31002	12668
2010年	14	47850	34282	13568
2011年	15	59287	42415	16872
2012年	15	72397	52043	20354
2013年	16	84572	61709	22863
2014年	17	78955	57320	21635
2015年	20	88778	62297	26481
2016年	30	153084	71.6%	28.4%
2017年	34	190610	70.8%	29.2%



2017年主要临床分离菌种分布 (前20位)



190610株临床分离菌在各类标本中的分布





中华人民共和国农业部

Ministry of Agriculture of the People's Republic of China

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动物源病原菌耐药性数据库系统

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监控级用户登录

公众级用户登录

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我国的动物源细菌耐药性已十分严重,令人忧心是,“细菌耐药性↑—用药量/用药种类↑—细菌耐药性↑”这种现象还在循环上演。迫切需要开展动物源细菌耐药性监测,掌握其本底和变迁数据,以评估动物源细菌耐药性产生与传播的风险,指导养殖业合理使用抗生素。

我国科研人员开展相关研究,农业部2008年启动了动物源细菌耐药性监测计划,已获得了大量有价值的耐药性数据。在国家科技支撑计划项目(项目编号:2012BAK01B00)和公益性行业(农业)科研专项(项目编号:201203040)的资助下,建设完善了动物源病原菌耐药性监测数据平台,支持耐药性监测数据的采集、统计、分析与应用。

本系统采集了从2001年到2014年的动物源病原菌药敏实验数据66多万条和监测工作专家辅助,具有判定、统计耐药性,对比分析耐药情况和趋势、用药建议等功能,为药政部门、食品安全监管部门、疾病预防控制中心、动物疾病预防控制中心、养殖企业、制药企业、科研院所等提供了基础数据支持和应用指导。



管理级用户登录

用户名:

密码:

验证码:

2067 [看不清,换一个](#)

Database on AMR of Animal Origin

Foodborne Pathogen Surveillance

Regular Surveillance

E. coli

Salmonella

Staphylococcus aureus

Listeria monocytogenes

Bacillus cereus

Shigella

Vibrio parahaemolyticus

Cronobacter

Pseudomonas aeruginosa

Targeted Surveillance

Chicken meats - *Salmonella*

Chicken meats - *Campylobacter*

Aquatic products - *V. parahaemolyticus*

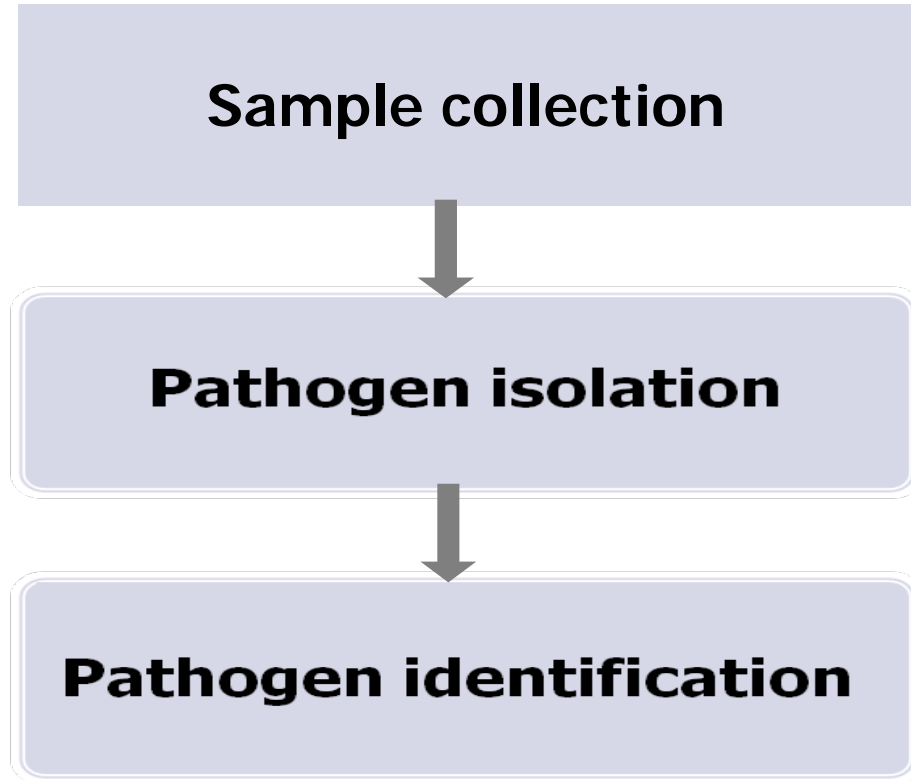
RTE meat - *Listeria monocytogenes*

Infant formula - *Cronobacter*

All samples from retailers

Pathogen – food combination

Regular Surveillance for Foodborne Pathogens in China



Local CDC

CFSA

(5,000-10,000 isolates per year)

- Further Confirmation

- Antimicrobial susceptibility test and AMR mechanism

- Genetic Characterization

- PFGE, MLST, MLVA

- Virulence gene detection

- Toxic effect on cells

- Whole genome sequencing

Gene *mcr-1* Positive *Salmonella* Cultured from Foods in Regular Surveillance

Strain	CFSA664	CFSA122	CFSA12	CFSA244	CFSA1096	CFSA231	CFSA629
Serotype	Indiana	Typhimurium	Typhimurium	Typhimurium	London	Derby	Typhimurium
Year	2011	2013	2014	2014	2015	2016	2016
Food	Retail chicken carcass	Retail dumpling	Retail Pork	Retail Pork	Retail Pork	Dumpling	-

CFSA: Data not published

Surveillance of Carbapenem - Resistant *Salmonella* from Retail Foods

Targeted surveillance:

All strains are susceptible to carbapenem

Ls

3

1601

NON-clinical

386

Regular surveillance

Salmonella in retail food, 2013-2015, 32 provinces

Target & Regular

Clinical cases, retail food, environment, pet (2013)

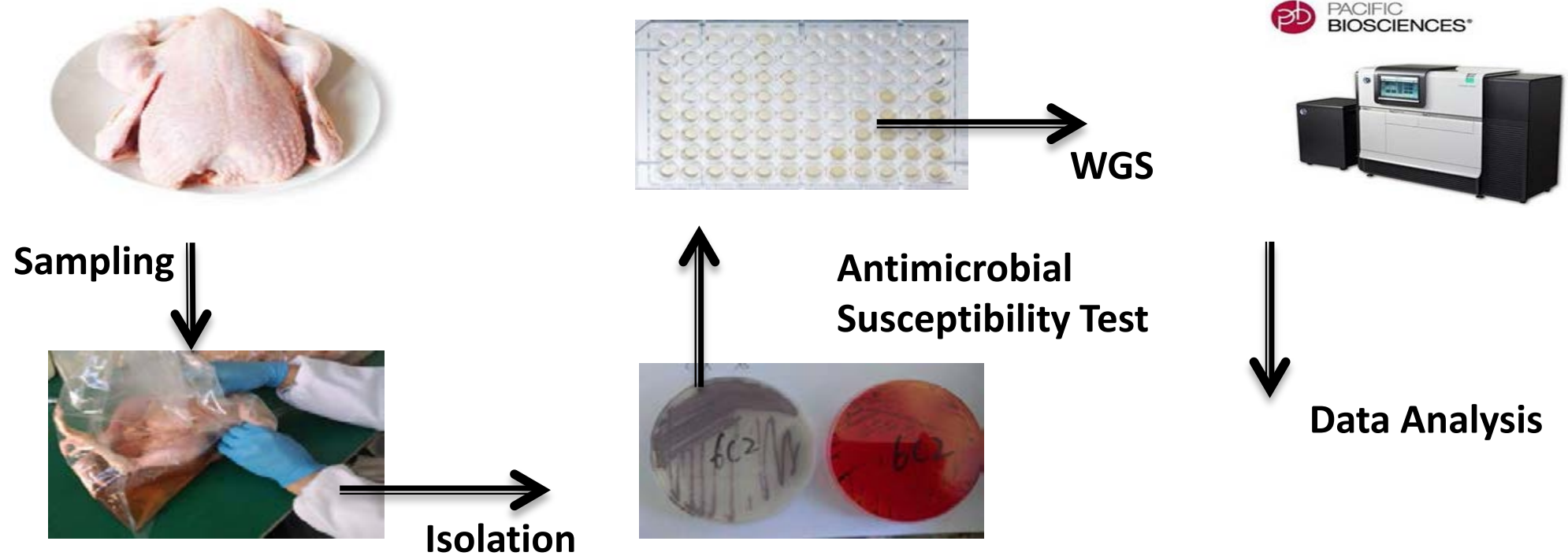
Antibiotic susceptibility of *S. Indiana* C629 to 23 antibiotics obtained in target surveillance in 2014

Class	Antimicrobial Agent	MIC (mg/L)	R/I/S
Penicillins	Ampicillin	>128	R
Cephalosporins	Cefepime	>16	R
	Cefoxitin	>32	R
	Cefazolin	>32	R
	Cefotaxime	>16	R
	Ceftazidime	>32	R
	Ceftiofur	>32	- ^b
Carbapenems	Imipenem	4	R
	Meropenem	8	R
Polymyxin	Colistin	0.5	S
Folate pathway inhibitors	Trimethoprim/sulfamethoxazole	>8/152	R
Aminoglycosides	Streptomycin	>32	- ^b
	Gentamicin	>32	R
Tetracyclines	Tetracycline	>32	R
	Tigecycline	<0.5	- ^b
β -lactamase inhibitor combinations	Amoxicillin/Clavulanic Acid	>64/32	R
Phenicol	Chloramphenicol	>32	R
	Florfenicol	>16	R
Macrolides	Azithromycin	>64	R
Fluoroquinolones	Nalidixic acid	>128	R
	Ciprofloxacin	>4	R
	Enrofloxacin	>8	R
Mequindox	Mequindoxs	>64	-

Antimicrobial resistant phenotype of C629

- ▶ Carbapenem resistance
- ▶ Co-resistance to ciprofloxacin-cefotaxime
- ▶ Extended Spectrum β -Lactamases (ESBLs)
- ▶ Resistant to antibiotics used in clinical and livestock
- ▶ Extensively drug-resistant (XDR)

Targeted Surveillance of AMR *Salmonella* from Retail Chicken Carcass



Distribution of AMR Patterns for Different Salmonella Serovars

Number of Class of Antimicrobials	No. of strains of dominant serovars (Percentage)											
	Total (n=2210)	Enteritidis (n=673)	Indiana (n=365)	Infantis (n=211)	Typhimurium (n=163)	Agona (n=162)	Derby (n=81)	Rissen (n=68)	Dabou (n=58)	Thompson (n=50)	Hadar (n=46)	Others (n=333)
0	438(19.8%)	68(10.1%)	6(1.6%)	16(7.6%)	24(14.7%)	135(83.3%)	7(8.6%)	12(17.6%)	4(6.9%)	19(38.0%)	0(0.0%)	147(44.1%)
1	645(29.2%)	271(40.3%)	12(3.3%)	141(66.8%)	34(20.9%)	9(5.6%)	15(18.5%)	32(47.1%)	43(74.1%)	11(22.0%)	0(0.0%)	77(23.1%)
2	160(7.2%)	20(3.0%)	19(5.2%)	15(7.1%)	9(5.5%)	0(0%)	10(12.3%)	3(4.4%)	11(19.0%)	0(0.0%)	42(91.3%)	31(9.3%)
3	175(7.9%)	128(19.0%)	18(4.9%)	1(0.5%)	10(6.1%)	0(0%)	4(4.9%)	2(2.9%)	0(0.0)	0(0.0%)	2(4.3%)	10(3.0%)
4	198(9.0%)	148(22.0%)	15(4.1%)	0(0%)	16(9.8%)	1(0.6%)	9(11.1%)	2(2.9%)	0(0.0)	0(0.0%)	2(4.3%)	5(1.5%)
5	101(4.6%)	14(2.1%)	25(6.9%)	1(0.5%)	19(11.7%)	6(3.7%)	9(11.1%)	7(10.3%)	0(0.0)	1(2.0%)	0(0.0%)	19(5.7%)
6	209(9.4%)	21(3.1%)	62(17.0%)	37(17.5%)	27(16.6%)	11(6.8%)	3(3.7%)	9(13.2%)	0(0.0)	6(12.0%)	0(0.0%)	33(9.9%)
7	184(8.3%)	3(0.5%)	109(29.9%)	0(0%)	24(14.7%)	0(0%)	24(29.6%)	1(1.5%)	0(0.0)	13(26.0%)	0(0.0%)	10(3.0%)
8	100(4.5%)	0(0%)	99(27.1%)	0(0%)	0(0%)	0(0%)	0(0.0%)	0(0.0%)	0(0.0)	0(0.0%)	0(0.0%)	1(0.3%)
≥3 (MDR)	967(43.8%)	314(46.7%)	328(89.9%)	39(18.5%)	96(58.9%)	18(11.1%)	49(60.5%)	21(30.9%)	0(0.0)	20(40.0%)	4(8.7%)	78(23.4%)
≥5	594(26.9%)	38(5.7%)	295(80.8%)	38(18.0%)	70(42.9%)	17(10.5%)	36(44.4%)	17(25.0%)	0(0.0)	20(40.0%)	0(0.0%)	63(18.9%)

ESBLs distribution of cefotaxime and ciprofloxacin co-resistant *S.* Indiana with different antimicrobial resistance profiles

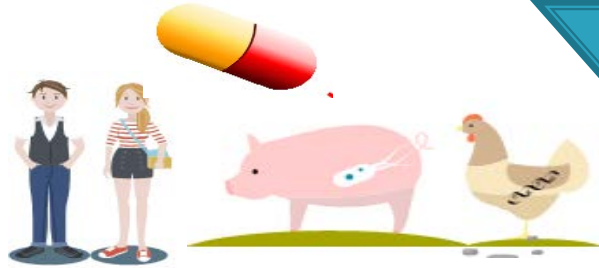
Antimicrobial resistance profile	Number of Isolates	Number of ESBLs
GEN-CHL-CIP-NAL-AMP-SAM-TET-CAZ-CTX-SXT	32	32
GEN-CHL-CIP-NAL-AMP-SAM-TET-CTX-SXT	66	65
GEN-CHL-CIP-NAL-AMP-SAM-TET-CAZ-CTX	11	11
GEN-CHL-CIP-NAL-AMP-SAM-CAZ-CTX-SXT	15	14
GEN-CHL-CIP-NAL-AMP-SAM-CTX-SXT	19	18
CHL-CIP-NAL-AMP-SAM-TET-CTX-SXT	13	13
GEN-CHL-CIP-NAL-AMP-SAM-TET-CTX	9	9
CHL-CIP-NAL-AMP-SAM-CAZ-CTX-SXT	1	0
GEN-CHL-CIP-NAL-AMP-TET-CTX-SXT	1	1
GEN-CIP-NAL-AMP-SAM-TET-CTX-SXT	3	3
GEN-CHL-CIP-NAL-AMP-SAM-CTX	4	4
GEN-CHL-CIP-NAL-AMP-CTX-SXT	2	2
GEN-CIP-NAL-AMP-SAM-CTX-SXT	1	1
CHL-CIP-NAL-AMP-CAZ-CTX-SXT	1	1
GEN-CHL-CIP-NAL-AMP-TET-CTX	1	1
GEN-CIP-NAL-AMP-SAM-TET-CTX	1	1
GEN-CIP-NAL-AMP-CTX-SXT	1	1
CIP-NAL-AMP-SAM-CTX	1	1
CIP-NAL-AMP-TET-CTX	1	1
Total	183	179

Comparisons of resistance to different antimicrobial agents between *Salmonella* isolates recovered from different seasons

Antimicrobials	No. of resistant isolates				P Value*
	Spring + Winter (n=834)		Summer + Autumn (n=1376)		
Gentamicin	279	33.45%	176	12.79%	<0.001
Chloramphenicol	279	33.45%	246	17.88%	<0.001
Ciprofloxacin	220	26.38%	144	10.47%	<0.001
Nalidixic acid	610	73.14%	950	69.04%	0.04
Ampicillin	500	59.95%	451	32.78%	<0.001
Ampicillin-sulbactam	442	53.00%	399	29.00%	<0.001
Tetracycline	437	52.40%	490	35.61%	<0.001
Ceftazidime	76	9.11%	28	2.03%	<0.001
Cefotaxime	182	21.82%	65	4.72%	<0.001
Trimethoprim-sulfamethoxazole	314	37.65%	300	21.80%	<0.001
Imipenem	0	0.00%	0	0.00%	-

Capacity Building

AMU in
Human & Animals



AMR in Human,
Animals, Environment

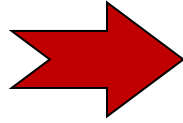


Integrated
Surveillance

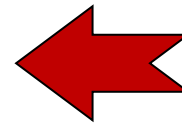
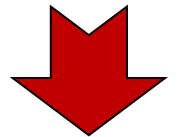
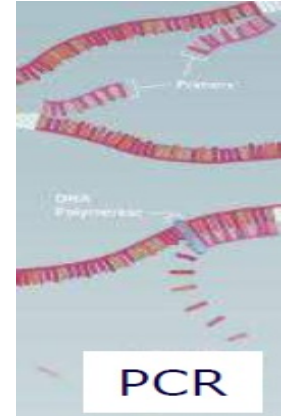
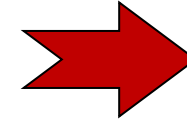
Data Analysis



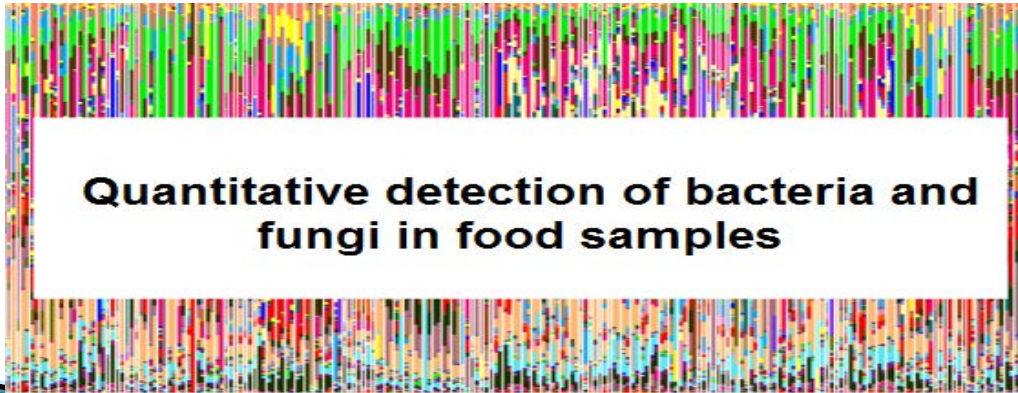
Capacity Building in AMR Surveillance: Next Generation Sequencing



DNA Extraction

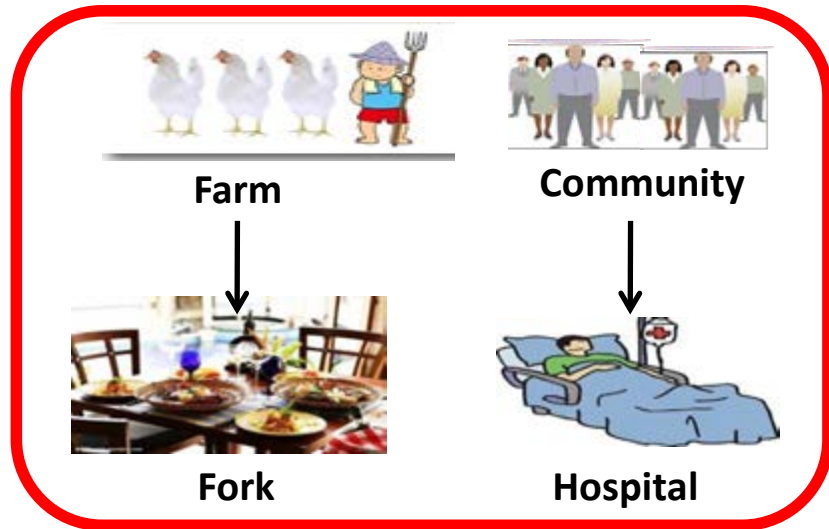


**Quantitative detection of bacteria and
fungi in food samples**

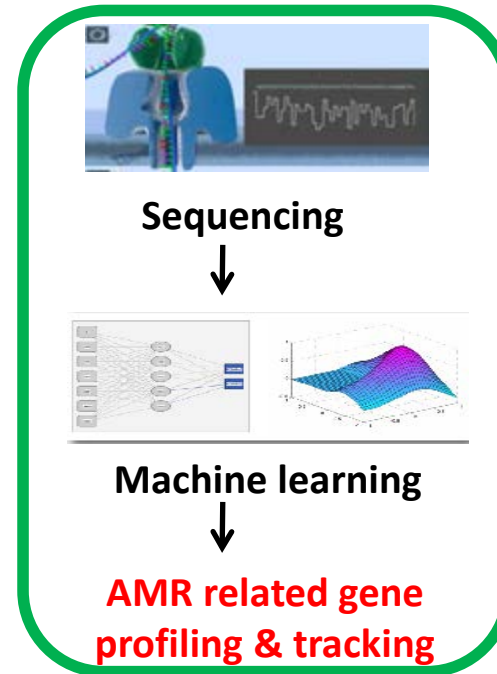


Using Big Data to Fight AMR – Advanced analytics

Surveillance



Mategenomics + Machine learning



Output



Capacity Building in AMU Surveillance

AMU in humans

- ▶ national antimicrobial sales data
- ▶ in hospitals
- ▶ in community

AMU in animals

- ▶ national antimicrobial sales data
- ▶ antimicrobial consumption by animal species
- ▶ continuous collection of consumption data by animal species
- ▶ data from a sample of farms
- ▶ stratification of sales data

Integrated surveillance system at national level is the KEY

Capacity building in data analysis

Antimicrobial
consumption in
humans



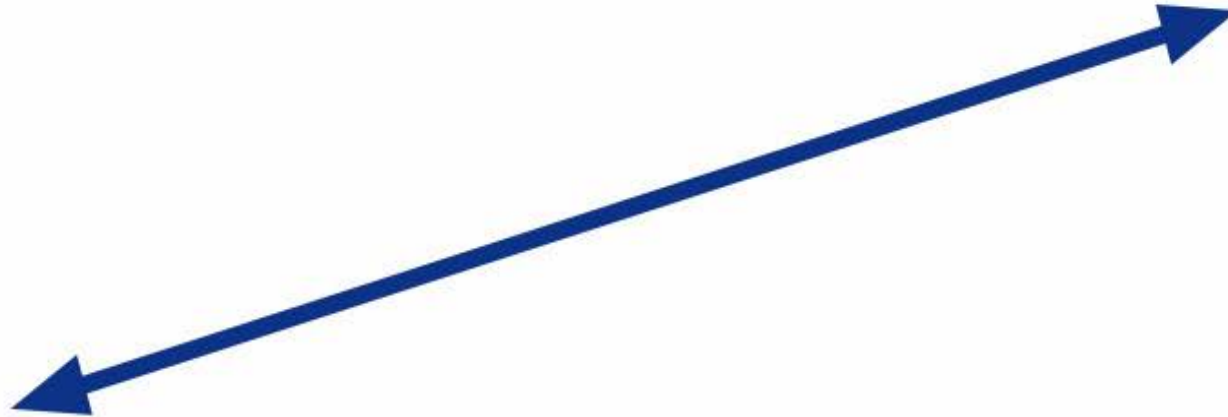
Antimicrobial
resistance in
humans



Antimicrobial
consumption in
animals




Antimicrobial
resistance in
animals



Impact of AMU on AMR across sectors

Conclusion

- ▶ The key word of national AMR surveillance is **integration**.
 - ▶ AMU should be included as an important part.
 - ▶ Capacity building in integrated AMR surveillance should include:
 - Plan development
 - Staff training on sampling and analytical methods
 - Quality control
 - Data analysis, and
 - Report preparation and data sharing
- 

Acknowledgement



国家食品安全风险评估中心
China National Center for Food Safety Risk Assessment



中华人民共和国科学技术部
Ministry of Science and Technology of the People's Republic of China



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