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For centuries, infectious diseases have been the major cause of death in humans. Until recently, the scientific community believed that advances in the development of vaccines and effective antibiotic therapy would eliminate many infectious diseases by the 21st century. However, Infections continue to be a major healthcare challenge even today. Infections contribute to patient deaths and disability, promote resistance to antibiotics and generate additional expenditure to those already incurred by the patients' underlying disease. According to the World Health Organization's data, at any given time, more than 1.4 million people worldwide become seriously ill from such infections. Between 5 to 10% of these patients die. In developing countries' the proportion of patients affected can exceed 25%. Also, patients from developing countries experience more of surgical site infections and neonatal Infections.

Infection control and prevention is one of the most challenging issues facing health care organizations today, from quality of care, patient safety and cost of care/ financial perspectives. As the number and spectrum of coverage of antimicrobial agents have increased, so have the resistance patterns, infectivity and communicability of the microbes. However, lax attitudes among physicians regarding the application of the advances in healthcare, over the counter use and under dosing of antibiotics and the remarkable ability of microorganisms to adapt are threatening much of the progress made in the fight against infection. We now find ourselves faced with resistant strains of microorganisms that are appearing in epidemic proportions.

Strategies on infection control and prevention of health care associated infections has acquired an urgent dimension with the evolution of a number of organisms that are resistant to commonly used antimicrobial agents. Furthermore, shrinking geographical boundaries and increasing global travel allow these germs to spread worldwide rapidly. Almost all microorganisms known to man have started to develop resistance, at a rate much faster than newer drugs being developed. So much so, that there are only a handful of pharmaceutical companies willing to invest in the development of newer molecules. At this rate, in the very near future, there will not be any effective antibiotics for many of the life threatening infection like AIDS, tuberculosis, malaria, etc. Antimicrobial resistance is not a new problem but the one which has become more dangerous.

"Even as the controversy over the origin of the new antibiotic-resistant bacteria named after India continues, the World Health Organization (WHO) has virtually endorsed the study published in The Lancet Infectious Diseases journal saying that the article had drawn attention to the issue of antimicrobial resistance (AMR), and, in particular, raised the awareness of infections caused by multi-drug resistant bacteria. The World Health Organization (WHO) has advised that countries should be prepared to implement hospital infection control measures to limit the spread of multi drug resistant strains and to reinforce national policy on prudent use of antibiotics reducing the generation of antibiotic-resistant bacteria." AMR was the WHO theme for the year 2010.

The first step of the solution to the problem is quite simple - judicious use of antibiotics. Infection control by other methodologies is equally important. It is of paramount importance for hospitals to have an effective infection control policy. Infection control in the health care setting has two primary goals. The first is to reduce the incidence of nosocomial infections in susceptible patients. The second is to protect health care workers from transmissible diseases.

The success of any infection control program depends on acceptance of recommended safe practices by clinicians, residents, interns, medical students and the nursing fraternity. Safe and rational use of anti-microbial agents is another pre-requisite to prevent propagation of anti-microbial resistance. Hence it is essential to create awareness on the scientific usage of these agents among the medical fraternity, so as to cultivate rational and scientifically sound prescription practices. One of the drawbacks of rapid expansion of information access is an ever-widening knowledge gap. It is obvious that practitioners who spend their time caring for patients, find it difficult to keep up with the latest developments in the field. A few have the sophistication to understand the myriad vistas of new knowledge that are unwrapped each passing day. Clearly there is a need to have complex information presented in an efficient and capsular format.

With these goals, the hospital infection control committee of MGMCRI had undertaken the task of organizing annual conferences on “Infection control and Rational Antimicrobial Therapy”. The first of these trans-disciplinary annual conferences was on “Infection Control and Rational Antimicrobial Therapy” on October 22 – 23, 2010, which was well received with over 1000 delegates taking part in the sessions. This felt need of our regional medical community has given us the momentum to continue our efforts every year and hence the second annual conference on 4th and 5th of November 2011. The conference theme, “Strategies to combat antimicrobial resistance–pursue or perish” was adopted from the WHO’s message for the world health day 2011, “Combat Antimicrobial Resistance – No action today; No cure tomorrow”. The third of the series, ‘The study of Regional Antibiotic sensitivity patterns and evolution of Standard treatment protocols’ is planned in Oct 2014 and initiatives have started.

The deliberations of the first two events are brought out as a special edition of the Annals of SBV for wider readership and dissemination of knowledge.

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