

## **Concerns on Antibiotic resistance**

#### What is the issue?

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India is yet to regulate antibiotic use and it serves as a cause of concern.

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#### What are the recent happenings?

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• A recent investigation found that the world's largest veterinary drug-maker, Zoetis, was selling antibiotics as growth promoters to poultry farmers in India.

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- It had stopped the practice in the U.S, since the U.S. banned the use of antibiotics as growth-promoters in early 2017.  $\n$
- Even then, India is yet to regulate antibiotic-use in poultry.  $\space{1mm}\space{1mm$
- Technically, the drug-maker was doing nothing illegal and complying with local regulations in both countries.  $\n$
- But such reasoning is self-defeating, because antibiotic-resistance does not respect political boundaries.  $\gamman{\label{eq:self-def} \begin{aligned} \label{eq:self-def} \end{aligned} \end{alig$

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### What is the status of India?

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 $\bullet$  India stands to lose the most from antibiotic resistance is India, given that its burden of infectious disease is among the highest in the world.  $\n$ 

- According to a 2016 PLOS Medicine paper, 416 of every 100,000 Indians die of infectious diseases each year.  $\n$
- This is more than twice the U.S.'s crude infectious-disease mortality-rate in the 1940s, when antibiotics were first used there.  $\n$
- Thus if these miracle drugs stop working, no one will be hit harder than India.
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- This creates a need for a tighter regulatory regime in the country.  $\label{eq:linear}$

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### What are the steps taken so far?

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- There are three major sources of antibiotic resistance –  $\n$ 

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- 1. Overuse of antibiotics by human beings n
- 2. Overuse in the veterinary sector
- 3. Environmental antibiotic contamination due to pharmaceutical and hospital discharge.

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 To tackle the first source, India classified important antibiotics under Schedule H1 of the Drugs and Cosmetics Rules 1945.

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• Under the Rules, drugs specified under Schedule H and Schedule X are required to be sold by retail on the prescription of a Registered Medical Practitioner only.

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- Even then, Schedule H1 drugs are freely available in pharmacies, with state drug-controllers unable to enforce the law widely.  $\n$
- To tackle the second source, India's 2017 National Action Plan on Antimicrobial Resistance did talk about restricting antibiotic use as

growth promoters.

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- But the lack of progress on this front allows companies to sell last-resort drugs to farmers over the counter.  $\n$
- To tackle the third source, the same national action plan spoke about regulating antibiotics levels in discharge from pharmaceutical firms.  $\n$
- For instance, Hyderabad's pharmaceutical industry has been pumping massive amounts of antibiotics into local lakes, rivers and sewers. \n
- This has led to an explosion in resistance genes in these waterbodies.  $\slashn$
- Still, India is yet to introduce standards for antibiotics in waste water, which means antibiotic discharge in sewage is not even being monitored regularly.  $\n$

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# What should be done?

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- Antibiotics lose their efficacy against deadly infectious diseases worldwide.  $\n$
- According to a 2013 estimate, around 58,000 newborns die in India each year due to sepsis from resistant bacteria.
- As the country takes its time to formulate regulations, the toll from antibiotic-misuse is growing at an alarming rate.  $\n$
- The issue also seems to be business as usual for governments, private corporations and individuals who have the power to stall a post-antibiotic health complication.
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- Thus there is a need for stricter regulations and regulated monitoring, else India will have no one to blame but itself.  $\n$

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Source: The Hindu





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