

# Chapitre V

## Methodological recommendations for surveillance of bacterial resistance

To be actively involved in antimicrobial resistance surveillance at the local [1,2], national [3,4] or European level [5,6], microbiologists have to share common definitions and use a widely accepted methodology [1,3]. Therefore, the Scientific Board of ONERBA has issued in 2000 recommendations on methodological issues on surveillance of bacterial resistance to antimicrobials [7] aimed in helping microbiologists working in private practice, in hospitals, or in veterinary settings to participate to surveillance activities. These recommendations have been used for the preparation of the European recommendations for antimicrobial resistance surveillance [8].

ONERBA's recommendations relate especially to non-microbiological aspects of surveillance because precise recommendations on technical aspects of antimicrobial susceptibility testing (susceptibility tests, interpretation criteria, ...) have been established since many years in France (CA-SFM) [9]. The main topics developed in ONERBA's recommendations are:

- the different types of information, data collection, interpretation criteria, cross-resistance or co-resistance;
- definitions and thesaurus to be adopted in human or veterinary medicine with regards to the population under surveillance (identity and characteristics), dates, types of samples, bacteria, antimicrobials;
- duplicates : definitions and practical use;
- data stratification : indicators of medical activity, definition of hospital- or community-acquired infection in the hospital setting, specific indicators for multidrug-resistant bacteria, indicators for the veterinary medicine;
- external and internal quality controls, controls of likelihood.

The recommendations are available in French on onerba's website, <http://www.onerba.org>. The Scientific Board of ONERBA does not plan to update these recommendations because of the recent publication of European guidelines by the European Society for Chemotherapy, Microbiology and Infectious Diseases (ESCMID) in 2004 [8].

### References

1. Le bon usage des antibiotiques à l'hôpital. Recommandations pour maîtriser le développement de la résistance bactérienne. ANDEM, août 1996.
2. Maîtrise de la diffusion des bactéries multirésistantes aux antibiotiques. Ministère de l'Emploi et de la Solidarité. Secrétariat d'Etat à la Santé et à l'Action sociale 1999.
3. Plan national d'action pour la maîtrise de la résistance aux antibiotiques. France. Réseau national de santé publique. Saint-Maurice, janvier 1999.
4. Statens Serum Institut, Danish Veterinary & Food Administration, Danish Medicine Agency, Danish Veterinary Laboratory. Use of antimicrobial agents and occurrence of antimicrobial resistance in bacteria from food animals, foods and human in Denmark. DANMAP 2005.
5. The microbial threat: report from the invitational EU conference held in Copenhagen (9-10 september 1998). Ed. Vibeke Thamdrup Rosdahl and Knud Borge Pedersen.
6. Monnet DL. Toward multinational antimicrobial resistance surveillance systems in Europe. Int J Antimicrob Agents 2000 ; 15 : 91-101.
7. Recommandations méthodologiques pour la surveillance de la résistance aux antibiotiques. Conseil Scientifique de l'ONERBA . Ed. La Lettre de l'Infectiologue/Edimark 2000.
8. European recommendations for antimicrobial resistance surveillance. Cornaglia G, Hrynewicz W, Jarlier V, Kahlmeter G, Mittermayer H, Stratcounski L, Baquero F; On behalf of the ESCMID Study Group for Antimicrobial Resistance Surveillance. Clin Microbiol Infect. 2004; 10: 349-83.
9. Comité de l'antibiogramme de la Société Française de Microbiologie. Communiqué 2005. Société Française de Microbiologie. <http://www.sfm.asso.fr/>