BIVDA
British In Vitro Diagnostics Association

BIVDA AMR Working Party

An industry perspective

Sarah Wallis, January 2017

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120 full members
– manufacturers, distributors, subsidiaries

Approximately
8,000
UK employees

900 million
tests are carried out each year in the UK

£730 million
direct UK sales in 2014

- Industry association for the *in vitro* diagnostic sector in the UK
- Represent industry sector issues and concerns to policy makers and other stakeholders

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BIVDA AMR Position

- Recognise AMR is a global problem that requires collaborative work with pharma, genetics and biotech sectors
- Signatory to Declaration on Combating AMR – signed by 85 companies and industry associations across 18 countries
- Involved in the development of an international IVD-specific declaration for Davos 2017
- Excited about growing recognition of role of IVDs in tackling AMR

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BIVDA AMR Working Party

- Meets quarterly
- Representatives from over 40 different companies
- Range in size from SMEs to large multinationals
- Full variety of tests in terms of setting (lab or POC) and technology (culture media, lateral flow, molecular, genetic)

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Terms of Reference

Working Party Terms of Reference
Aims and Objectives for 2016

Name of Working Party: Antimicrobial Resistance (AMR)

Chair: Daniel White

Terms of Reference:

AMR is a high profile healthcare issue both nationally and internationally, and there is growing recognition that diagnostics have an important role to play in combatting this issue. The purpose of this group is to enable companies with an interest in AMR to work collaboratively in order to capitalise on the current momentum in this area and the opportunities that are arising through various initiatives.

Objectives:

1.	Develop a consensus industry position on AMR to aid external BIVDA messaging
2.	Raise profile and awareness of industry AMR group to external stakeholders
3.	Increase engagement with external stakeholders focusing on AMR
4.	Develop an industry AMR press book outlining currently available IVD tests
5.	Access case studies and health economic data to support industry messaging

Achievements 2016

- Position paper
- Infographics
- Stakeholder map
- Collection of case studies from member companies

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Plans for 2017

- The Working Party is currently drafting an open letter outlining the position of the IVD industry regarding AMR, to be published in 2017
  - outlining commitments from industry in addition to challenges to Government
  - sent to a variety of people within government and the NHS

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Wider BIVDA Activities

- BIVDA's AMR strategy is led by Barbara Fallowfield (barbara@bivda.co.uk)
  - Part of the UK AMR Strategy Diagnostics Sub-Group
  - Advisor for the Longitude Prize
  - Spoke at the Knowlex Infection Control meeting in September 2016, outlining the value of diagnostics in tackling AMR
  - Article included in a Media Planet publication on AMR in November 2016

Diagnostics are vital in tackling drug resistance

A multifaceted approach is needed to tackle antimicrobial resistance, and accurate diagnostics have a vital role to play in containing the problem and finding a solution

By Kate Sharma

Rapid diagnostics can be used at the point of care, such as in a GP surgery, to help diagnose an infection

PHOTO: THINKSTOCK

It's common knowledge that the misuse of antibiotics has exacerbated the problem of antimicrobial resistance (AMR). A failure to correctly diagnose many conditions correctly has led to drugs being used in far greater quantities than necessary.

"There has been a lot of emphasis on the push for 'cheap diagnostics' in recent years, which has completely reduced the value that diagnostics have to play in solving the problem," explains Barbara Fallowfield, Managing Director of the British In Vitro Diagnostics Association (BIVDA).

"What's equally concerning is that we have a tendency to focus on developing new diagnostics and ignore some of the tools already available."

One of the tools already in use is the C-reactive protein test (CRP), which can be used at the point of care to detect if a patient has a viral or bacterial infection and if antibiotics should be prescribed. The test is already used in many European countries, including the Netherlands, Sweden and Germany, where fewer antibiotics have been prescribed as a direct result.

Despite the fact that the CRP has been around for more than a decade and more than 19 pilot studies carried out, it's still not widely used in the UK, something Fallowfield feels needs to be addressed.

"It all comes down to changing behaviour," she explains. "There are questions about who will pay for it and who will conduct the tests. Rather than being seen as an expense, diagnostics need to be seen as part of the solution with a greater willingness to adopt the test and implement it effectively."

One of the recommendations made by Jim O'Neill in the much anticipated Review on AMR, published in May this year, was that by 2020 mandatory testing should take place in all high-income countries before antibiotics are prescribed. In order to achieve this, more funding is needed and authorities need to do more to incentivise the use of rapid point-of-care diagnostics.

Barbara Fallowfield
Managing director, British In Vitro Diagnostics Association (BIVDA)

The report also calls for a more multinational approach to innovation in diagnostics. One initiative aimed at kick-starting research is the Longitude Prize, which will award £10million to a project that provides a cost-effective and easy-to-use test for bacterial infections that will allow health professionals worldwide to administer the right antibiotics at the right time.

"It's really exciting to see such investment in research and development in this area," says Fallowfield. "But it needs to go hand-in-hand with greater use of the tools we currently have, innovation of existing resources and better surveillance so we have a global picture and can target support appropriately." When taking on the 'biggest global health threat,' there is no easy solution, which is why investment in all aspects of research and development, including diagnostics, is vital. ■

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