

Assigning defined daily/course doses for antimicrobials used in broiler production in Pakistan and comparing them with the European Medicines Agency values.



Herd level antimicrobial consumption in animals

Collect | Analyze | Benchmark | Communicate

4th Conference, Vienna, Austria

1st – 2nd February 2024

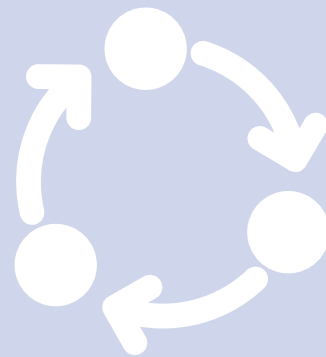
Qamer Mahmood

DVM, PhD candidate

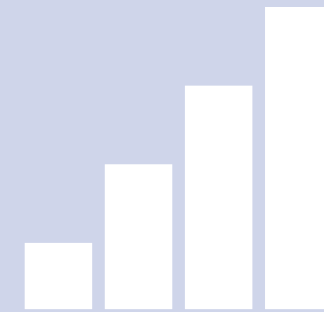
Ghent University, Belgium



Introduction



Methodology



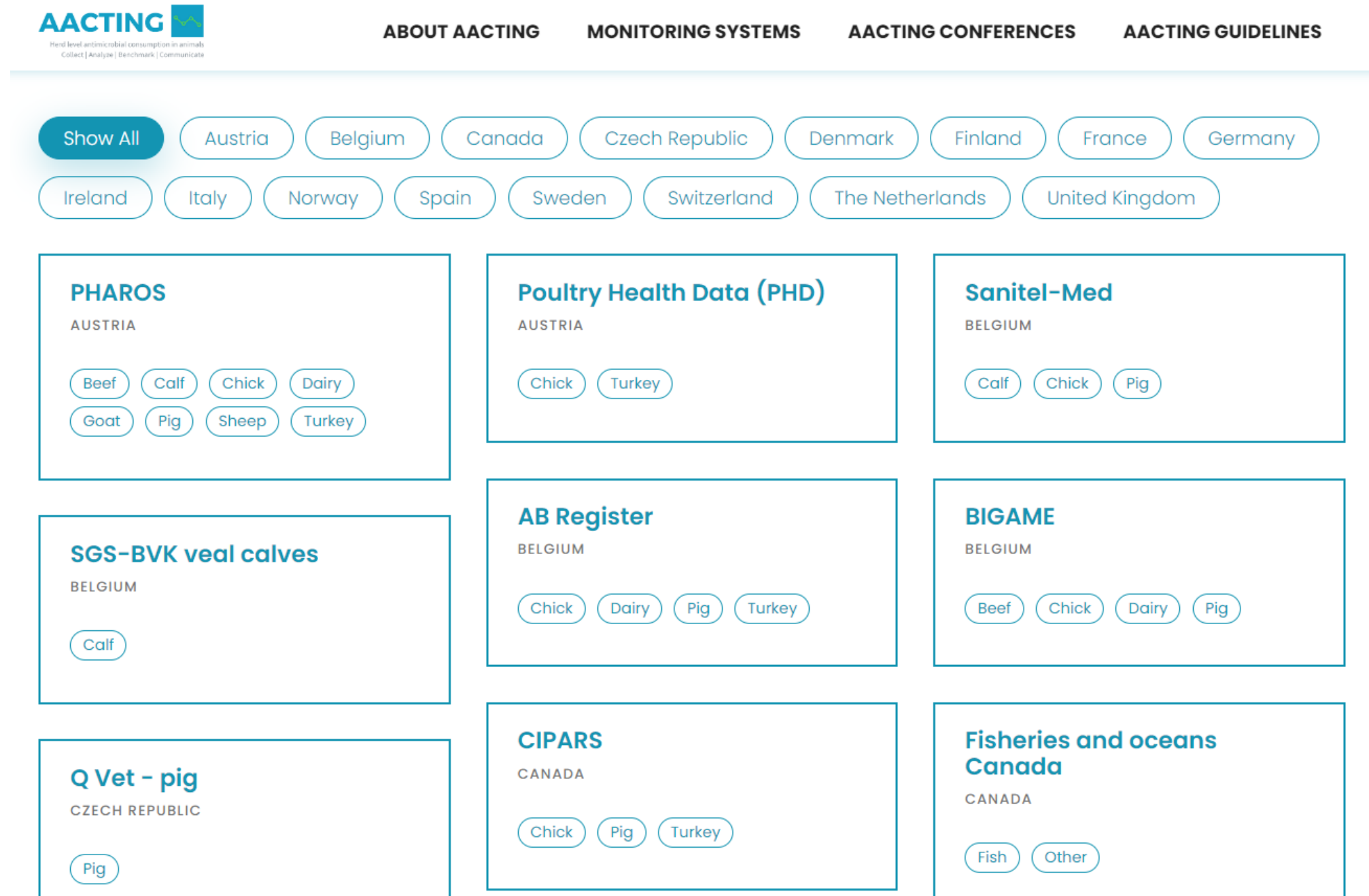
Results



Conclusions

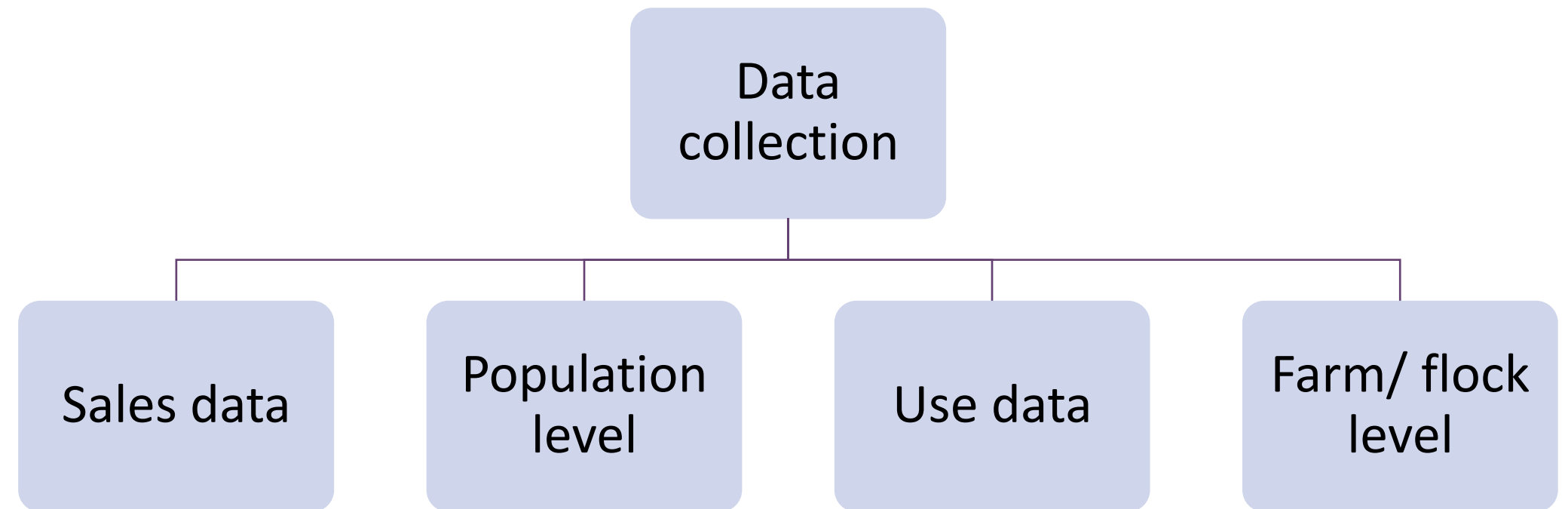
AMU monitoring at farm level

- Substantial AMU reduction in high income countries
- No comparable monitoring system exist in LMICs



AMU quantification

- Weight-based indicators
 - mg/PCU
 - Limitations?
- Dose-based indicators
 - DDD, DCD
 - Why dose-based indicators?
- Treatment Incidence (TI)?



Treatment Incidence

$$TI = \frac{\text{Total amount of active substance administered (mg)}}{\text{Dose (mg/kg)} \times \text{number of days at risk} \times \text{kg of animal at risk}} \times 100 \text{ AAR}$$

Defined daily dose (DDD_{vet})

Defined course dose (DCD_{vet})



ESVAC

Defined doses

- **DDD**: average dose of a drug for its main indication **per day** per kg of animal
- **DCD**: average dose of a drug for its main indication **per treatment course** per kg of animal

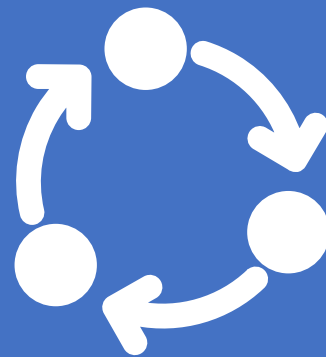
Objective

- To establish **DDD_{vet pk}** and **DCD_{vet pk}** for broilers
- To enable farm-level quantification and comparison of AMU across Pakistan

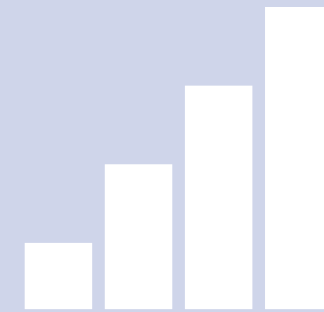




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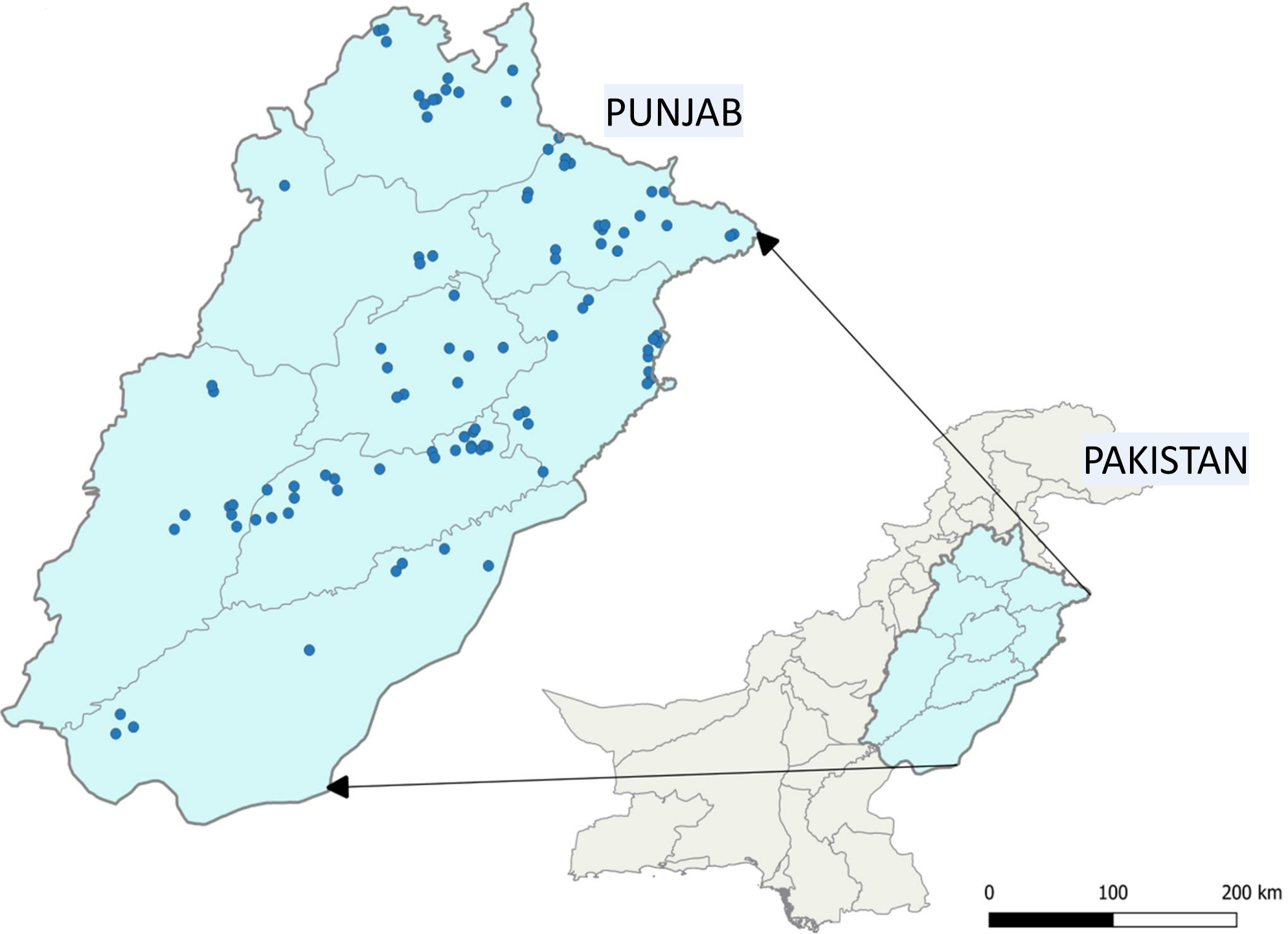
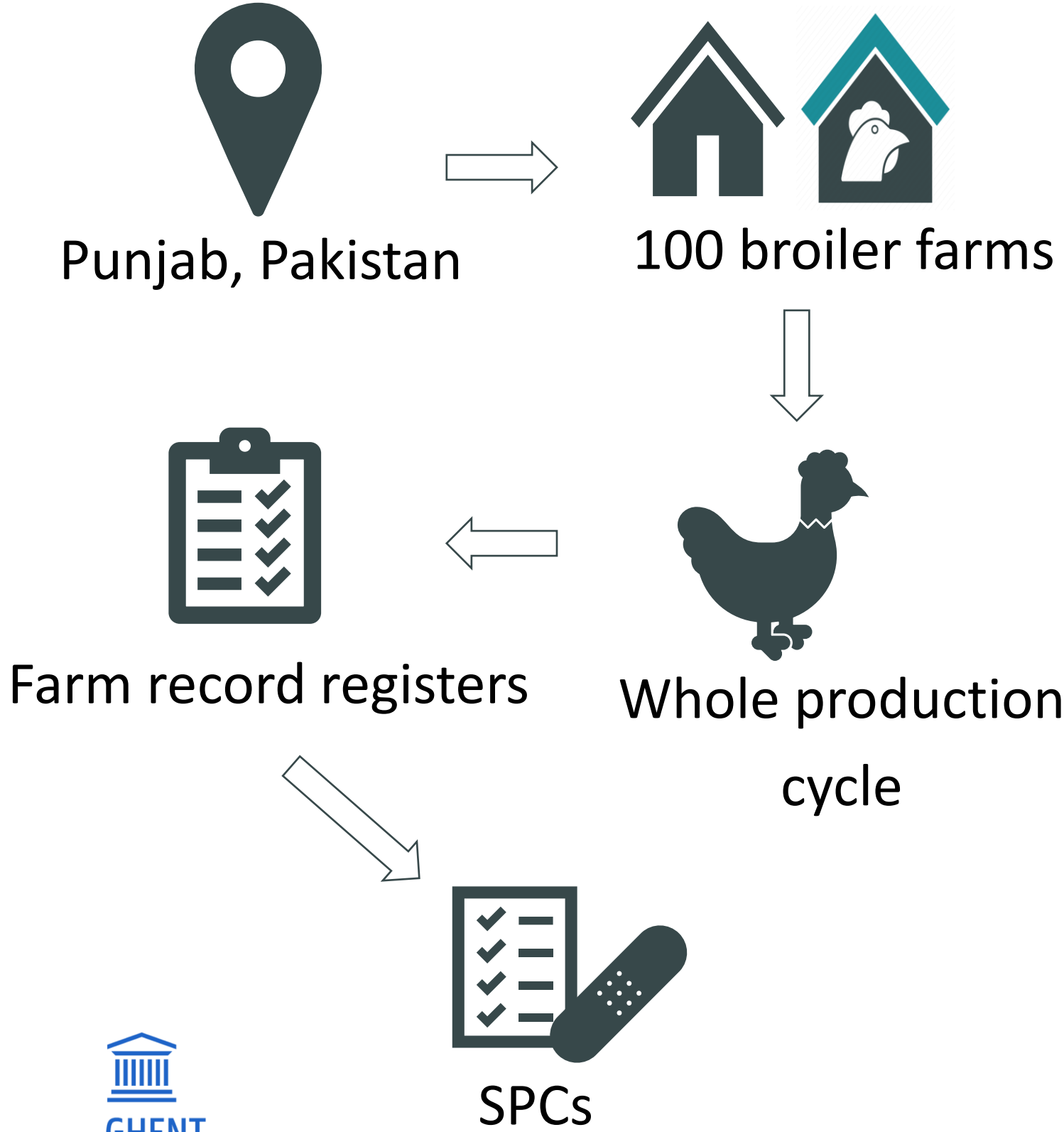


Results

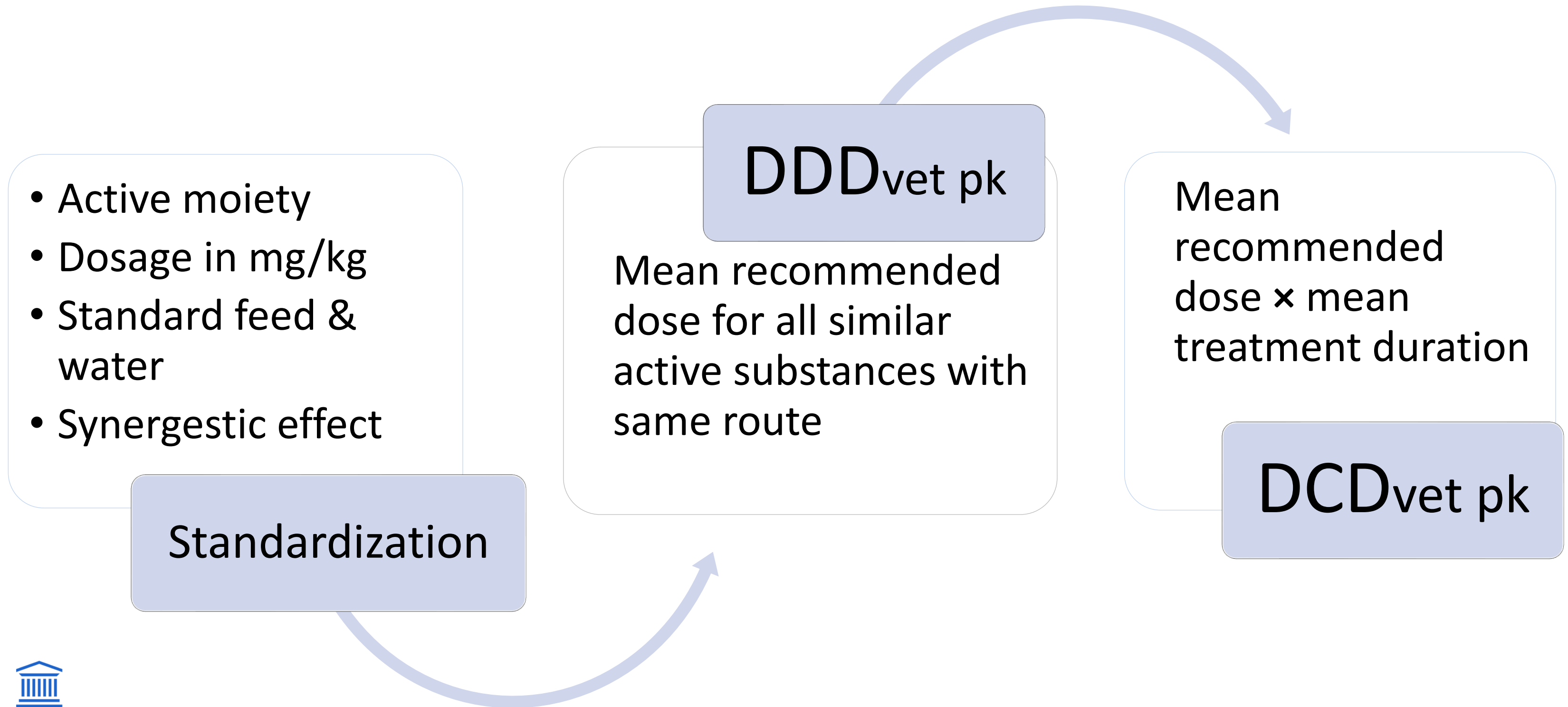


Conclusions

Data collection

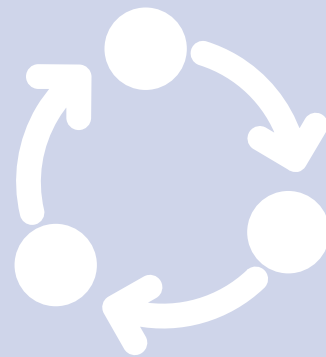


Assigning DDD_{vet} pk and DCD_{vet} pk

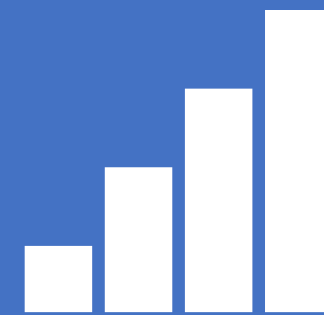




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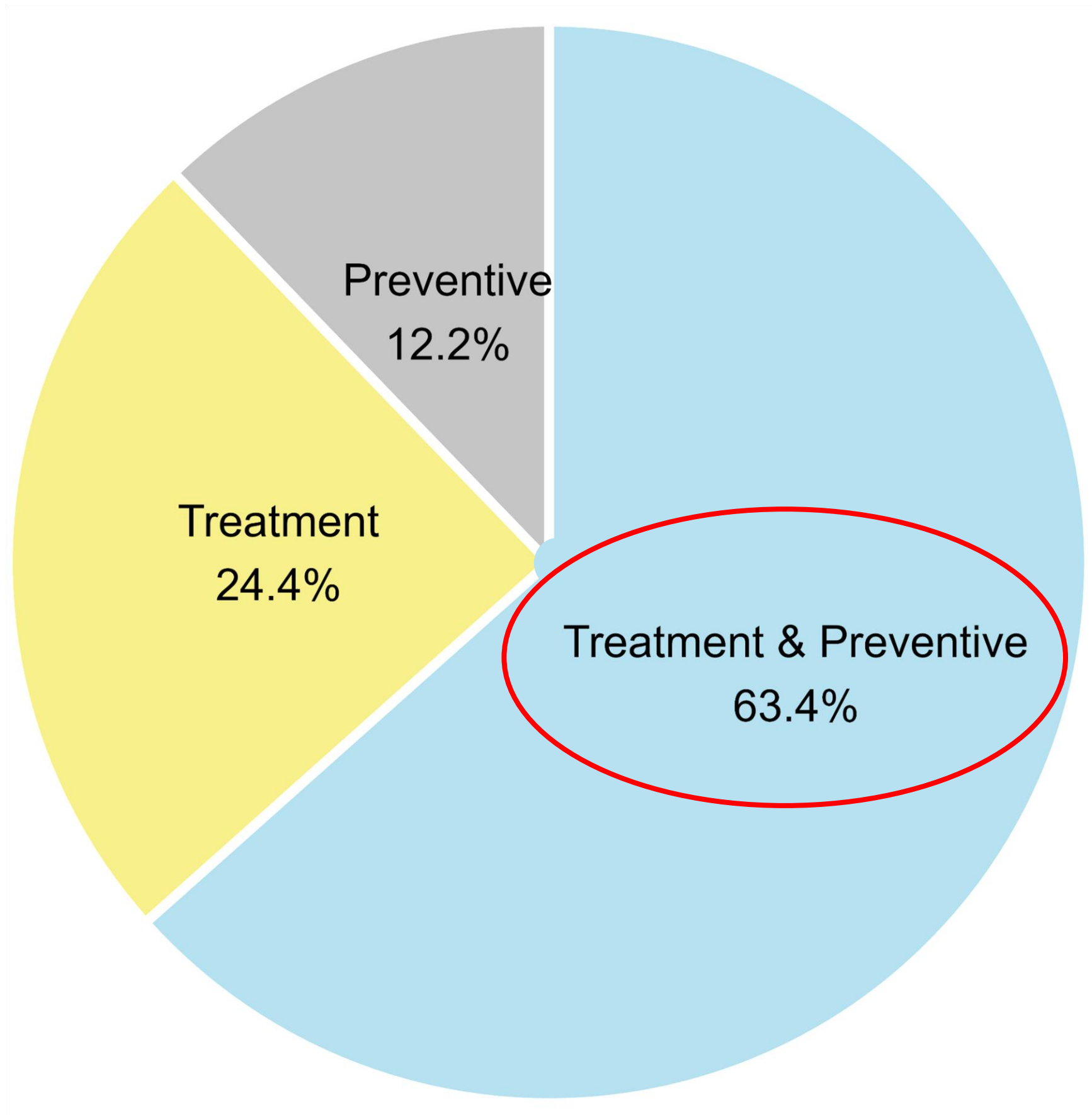


Results



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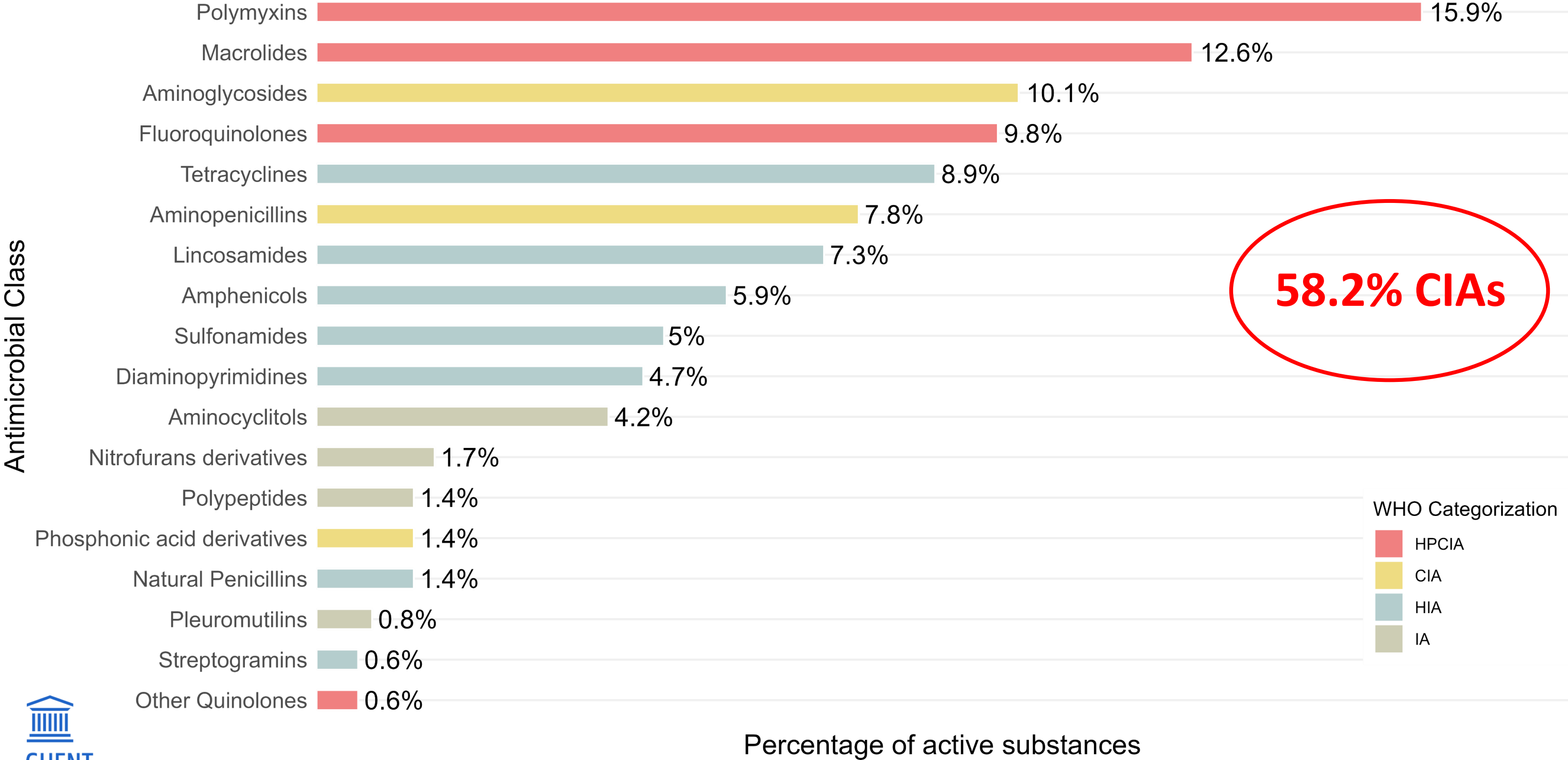
Recommended doses in SPCs



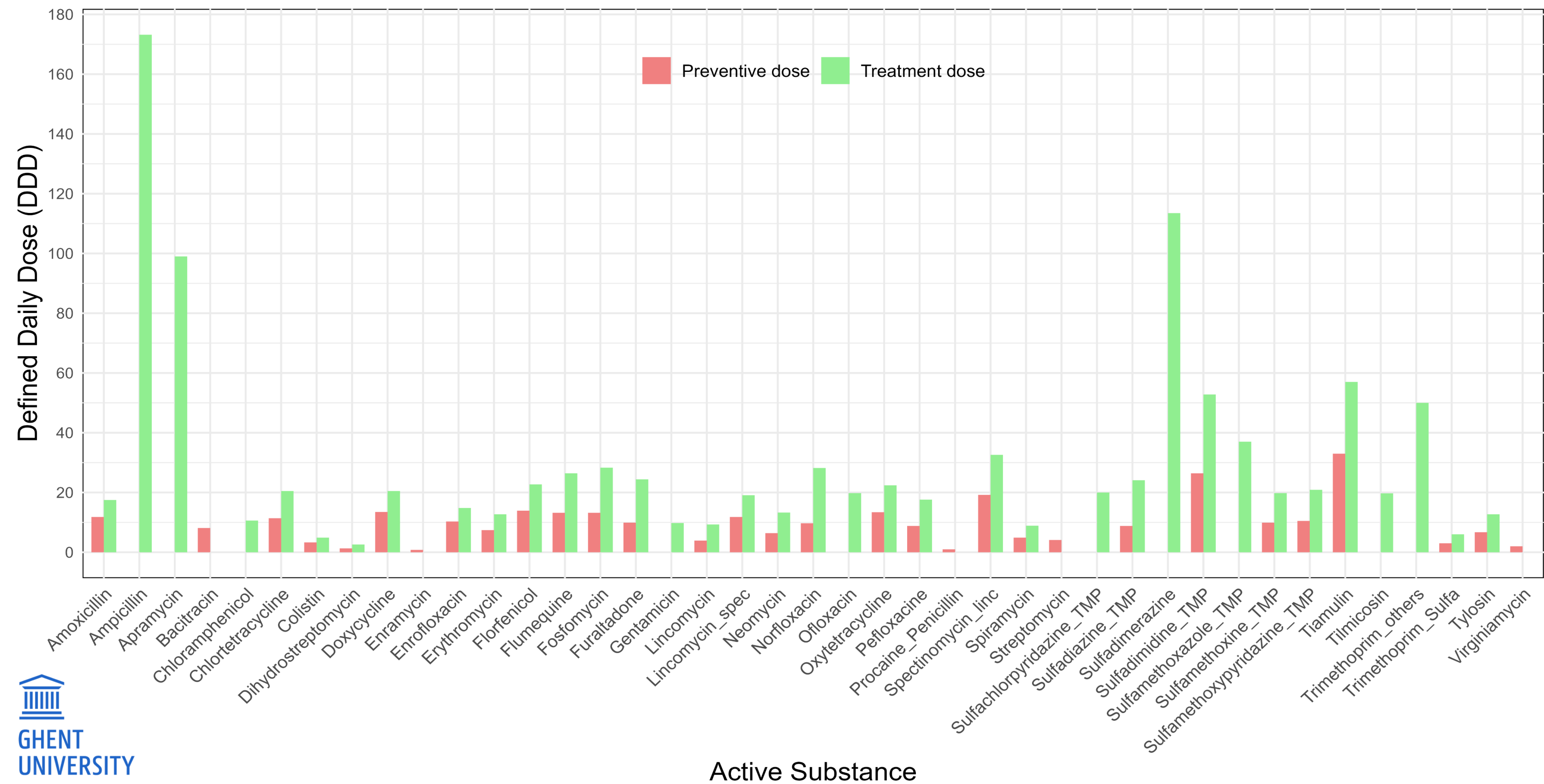
DDD for preventive antimicrobials?

- DDD_{vet pk} treatment for 88% (36/41) active substances
- DDD_{vet pk} preventive for 76% (31/41) active substances

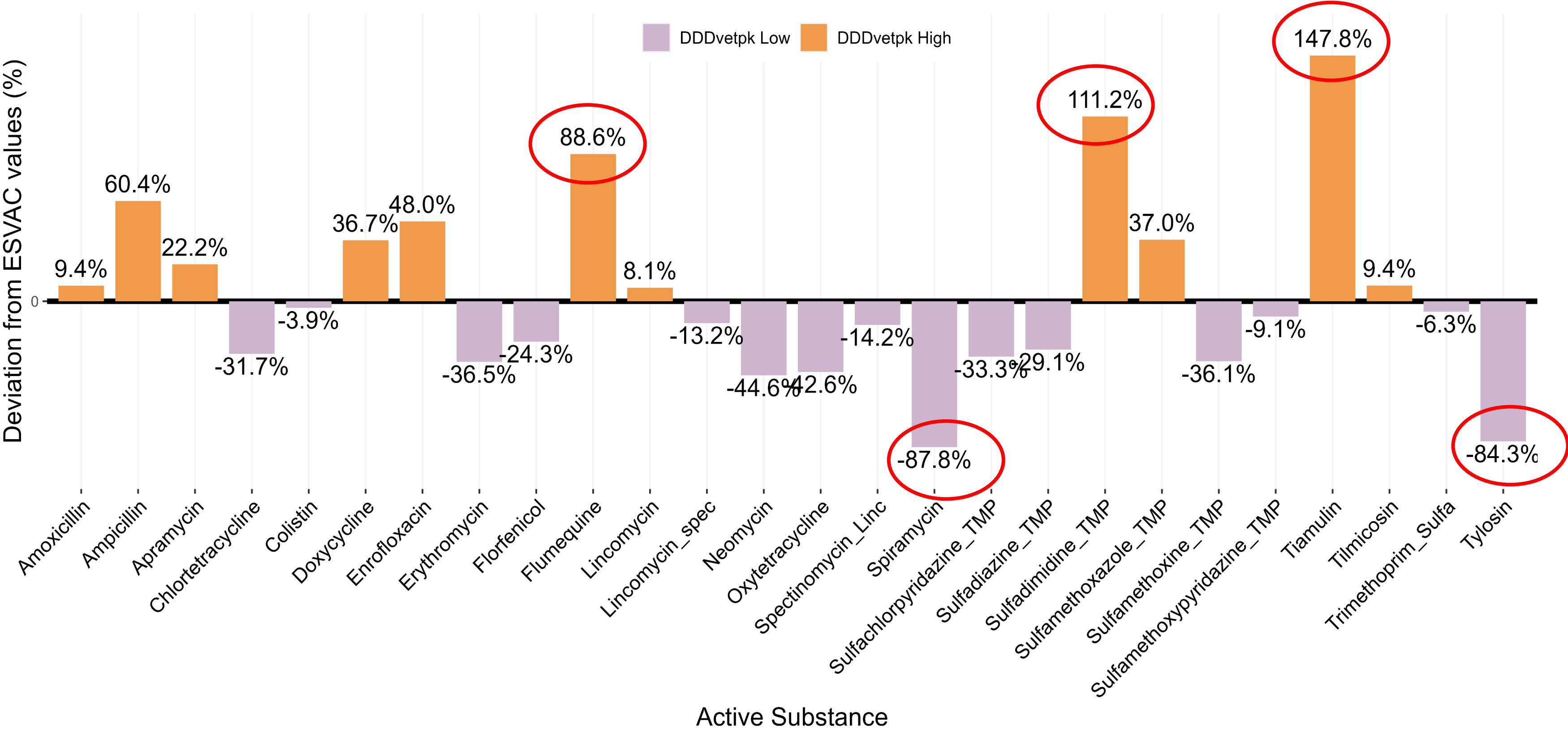
Choice of active substances



Defined daily doses



Comparison with ESVAC DDD_{vet} values

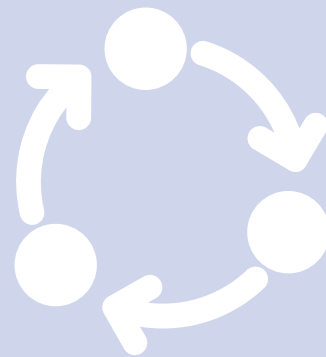


Comparison with ESVAC DDD_{vet} values

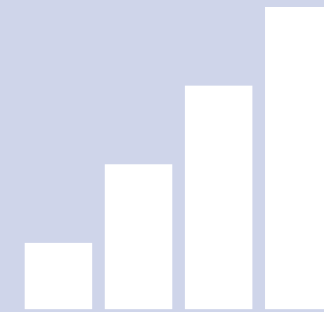
- Possible reasons for difference between Pakistani and EMA doses?
- What is the correct dose?



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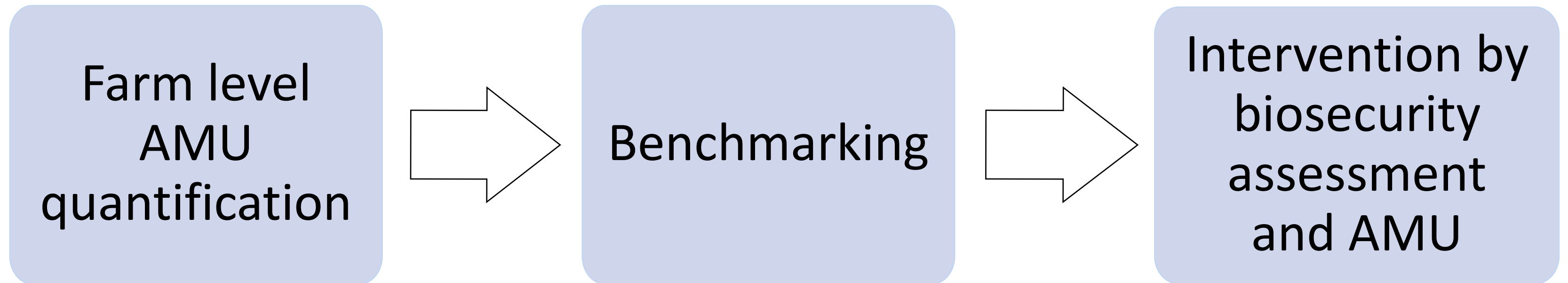
Conclusions

Key findings

- DDD_{vet pk} & DCD_{vet pk} list for Pakistan
- Difference with ESVAC values
- Alarming choice of AM classes (**HPCIA>IA**)
- **AGPs** in addition to treatment and preventive use
- **Variation in recommended doses** (AMX 4-26mg/kg, CTC, 7-32mg/kg, etc.)
- **Inconsistencies in units** (only 11 % in mg/kg, g/L, ml/L, g/ton, g/kg, kg/ton, IU/kg, ml/gallon, etc.)
- **AS compositions** (12 various units: mg/g, g/ml, g/kg, mg/ml, IU/g, MIU, g/L etc.)

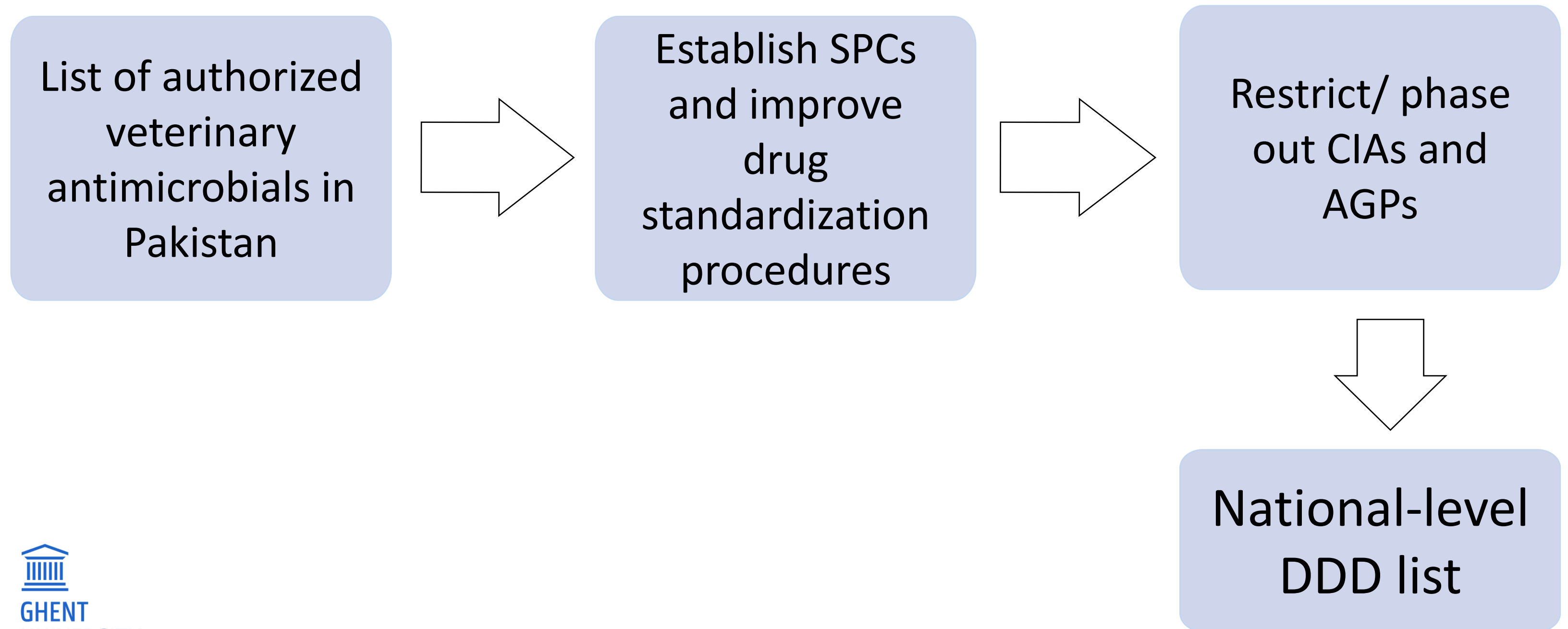
Next steps

What we plan to do further?



Next steps

What **policymakers** can do?



Thank you for your attention!

Acknowledgements

Veterinary Epidemiology Unit

Dept. of Internal medicine, Reproduction &
Population Medicine

Ghent university, Belgium

Email: Qamer.mahmood@ugent.be

[LinkedIn](#) >



Qamer Mahmood
Ph.D. candidate



Prof. Ilias Chantziaras
Co-promotor



Prof. Jeroen Dewulf
Promotor/ Team head

